2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P97000084893 DOCUMENT

1. Entity Name

FORSITE MANAGEMENT, INC.



FILED Mar 12, 2003 8:00 am 5 Secretary of State

03-12-2003 90067 012 ***150.00

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Zip Country Zip Country 5. Certificate of Status Dosined See S8. 75 Additional Fee Notification See Sequence Status Dosined See Sequence Sequence See Sequence S	Suite, Apt.	. #, etc.	Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
S. Name and Address of Current Registered Agent 5. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. The Above Address of State Observed City FL Zip Code City FL Zip Code City FL Zip Code 8. The Above Address of Port Acceptable) City FL Zip Code 8. The Above Address of Row Registered Agent City FL Zip Code 8. The Above Address of Row Registered Agent City FL Zip Code 8. The Above Address of Row Registered Agent City FL Zip Code 8. The Above Address of Row Registered Agent City FL Zip Code 8. The Above Address of Row Registered Agent City FL Zip Code 8. The Above Address of Row Registered Agent City FL Zip Code Addition City C	City & State			City	City & State			4.	FEI Number 65-0786937		
GRUDOVICH, GREGORY J 4891 SE MARINER VILLAGE LANE STUART FL 34997 City FL Zip Code 6. The above nahing pressy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fibrida. I am familiar with, and accept the obligation of inglished organ. SIGNATURE: FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE MAKE STREET AUDRESS STREET AUDRESS STREY AUDRESS STR	Zìp	~	Country	Zip		Cour	ntry 1000 as a	5.	Certificate of Status Desired	\$8.75 / Fee Requ	Additional
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After May 1; 2003 Fee will be \$55.00 May Be Added to Fees Make Check Payable to Florida Department of State 10.	SIGNATURE,			nt and title if appli	icable. (NOTE	: Registere	d Agent signature required	l when re	sinstating) DATE		
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to accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if other like empowered. of the corporation or the recei changed, or on an attachmen 797. LAWANICH 3/8/03

SIGNATURE: