2000 UNIFORM BUSINESS REPORT (UBR)

Apr 10, 2000 8:00 am Secretary of State DOCUMENT # **P97000091321** ASPEN COVE DEVELOPMENT, INC. 04-10-2000 90045 007 ***150.00 Principal Place of Business Mailing Address 250 INTERNATIONAL PKY, STE, 220 250 INTERNATIONAL PKY, STE, 220 **HEATHROW FL 32746-5006** HEATHROW FL 32746 000318442. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3477266 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name OGIER, GERALD D Street Address (P.O. Box Number is Not Acceptable) 250 INTERNATIONAL PKY, STE. 220 **HEATHROW FL 32746** Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE NAME NAME OGIER, GERALD D STREET ADDRESS STREET ADDRESS 250 INTERNATIONAL PKY, STE. 220 CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** Change ☐ Addition □ Delete TITLE NAME MCCLINTOCK, JOHN H NAME STREET ADDRESS STREET ADDRESS 250 INTERNATIONAL PKY, STE. 220 CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** Change ☐ Addition ☐ Delete TITLE TITLE NAME MCDANIEL, DAVID NAME STREET ADDRESS STREET ADDRESS 250 INTERNATION PKY STE 220 CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** ☐ Change Addition **VPTS** ☐ Delete TITLE TITLE NAME SCHAFFER, JOHN NAME STREET ADDRESS STREET ADDRESS 250 INTERNATIONAL PKY, STE 220 CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

signature: John Schaffer 4/4/00

SIGNATURE AND TYPED OR PRINTED NAM

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