FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 14, 2001 8:00 am Secretary of State DOCUMENT # P98000022148 MOYNAHAN DEVELOPMENT ASSOCIATES, INC. 04-14-2001 90025 017 \*\*\*150.00 Principal Place of Business Mailing Address 100 PARNELL ST 100 PARNELL ST 945535 MERRITT IS FL 32953 MERRITT IS FL 32953 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0827824 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent. 7. Name and Address of New Registered Agent MOYNAHAN, JOHN H JR Street Address (P.O. Box Number is Not Acceptable) 100 PARNELL ST MERRITT IS FL 32953 City Zip Code 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 ☐ Addition CR2E034 (10/00 TITLE ☐ Change TITLE ☐ Delete NAME MOYNAHAN, SUSAN M NAME STREET ADDRESS STREET ADDRESS 100 PARNELL ST CITY-ST-ZIP CITY-ST-ZIP MERRITT IS FL 32953 TITLE ☐ Delete TITLE Change Addition NAME MOYNAHAN, JOHN H JR STREET ADDRESS STREET ADDRESS 100 PARNELL ST CITY-ST-ZIP CITY-ST-ZIP MERRITT IS FL 32953 - Delete - Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change ☐ Delete ☐ Addition 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 agriculture.

SIGNATURE:

hu H. Moynahan Jr. President 9 Apr 01