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2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mar 22, 2001 8:00 am DOCUMENT # P98000055217 **Secretary of State** COURTNEY LANDING DEVELOPMENT, INC. 03-22-2001 90054 011 ***150.00 Principal Place of Business Mailing Address 250 INTERNATIONAL PARKWAY, SUITE 220 250 INTERNATIONAL PARKWAY, SUITE 220 HEATHROW FL 32746 HEATHROW FL 32746 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3518772 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name OGIER, GERALD D Street Address (P.O. Box Number is Not Acceptable) 250 INTERNATIONAL PARKWAY, SUITE 220 **HEATHROW FL 32746** City Zip Code 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, 2001 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 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete TITLE ☐ Change Ogier, Gerald D NAME OGIER, GERALD D NAME STREET ADDRESS STREET ADDRESS 250 INTERNATIONAL PARKWAY, SUITE 220 CITY - ST - ZIP CITY-ST-ZIP **HEATHROW FL 32746** TITLE ☐ Delete TITLE ☐ Change NAME SCHAFFER, JOHN A NAME STREET ADDRESS 250 INTERNATIONAL PARKWAY, SUITE 220 STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** Change Addition _TITLE___ ☐ Delete TITLE NAME MCDANIEL, DAVID G NAME STREET ADDRESS 250 INTERNATIONAL PARKWAY, SUITE 220 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** TITLE ☐ Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS 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