## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P98000071561 NEAL COMMUNITIES COUNTRY CLUB HOMES, INC. 04-26-2001 90123 049 \*\*\*150.00 Principal Place of Business Mailing Address 3711 CORTEZ ROAD WEST 3711 CORTEZ ROAD WEST BRADENTON FL 34210 **BRADENTON FL 34210** 957451 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 65-0857932 Appliea For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHIER, JAMES R Street Address (P.O. Box Number is Not Acceptable) 3711 CORTEZ ROAD WEST **BRADENTON FL 34210** 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 tife if applicable. (NOTE Registered Agent's gnature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD PTD TITLE CR2E034 (10/00) 🔀 Delete 7171.5 Change SCHIER, JAMES R PATRICK K. NeAL NAME NAME 37/1 CORTEZ RD. W. Suite 300 3711 CORTEZ RD. W. STREET ADDRESS STREET ADDRESS **BRADENTON FL 34210** CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34210 TATLE ☐ Delete TITLE OLSON, ANN M MARK SOCHAR NAME NAME 3711 CORTEZ RD W. SUITE 300 3711 CORTEZ RD. W. STREET ADDRESS STREET ADDRESS **BRADENTON FL 34210** CITY - ST- ZIP CITY-ST-ZIP BRADENTON FL 34210 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME. STREE! ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP ☐ Delete 70016 Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITL F ☐ Delete TITLE Change ■ Addition VAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete 1111.5 ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANN M. OLSON

4/19/01

FILED