2000 UNIFORM BUSINESS REPORT (UBR)

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

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED DOCUMENT # **P99000005444** Apr 25, 2000 8:00 am Secretary of State MICKLER'S LANDING, INC. 04-25-2000 90118 007 ***150.00 Principal Place of Business Mailing Address 1301 RIVERPLACE BLVD., S-1609 301 RIVERPLACE BLVD., S-1609 JACKSONVILLE FL 32207-9021 JACKSONVILLE FL 32207 2. Principal Place of Business 3. Mailing Address 344 South Nine Drive 344 South Nine Drive DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Ponte Vedra Beach, FL Applied For City & State Ponte Vedra Beach, FL Not Applicable Żip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 32082 Fee Required USA 32082 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name <u>James T</u> Mann PEEK. EUGENE G III Street Address (P.O. Box Number is Not Acceptable) 1301 RIVERPLACE BLVD., S-1609 <u>344 South Nine Drive</u> JACKSONVILLE FL 32207 8. The above name dentity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida /James T. Mann SIGNATURE (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 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 11. 12. TITLE ☐ Delete TITLE President PEEK, EUGENE G III NAME James T. Mann 1301 RIVERPLACE BLVD., S-1609 STREET ADDRESS STREET ADDRESS 344 South Nine Drive CITY-ST-ZIP CITY-ST-7IP JACKSONVILLE FL 32207 Ponte Vedra Beach, FL 32082 ☐ Addition ☐ Delete TITLE TITLE S/T NAME NAME Gleith J. Mann STREET ADDRESS STREET ADDRESS 344 South Nine Drive CITY-ST-7IP CITY-\$T-ZIP Ponte Vedra Beach, Florida 32082 Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F 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