2000 UNIFORM BUSINESS REPORT (UBR) FILED Jan 18, 2000 8:00 am Secretary of State DOCUMENT # **P99000046877** HERON BAY DEVELOPMENT, INC. 01-18-2000 90052 049 ***150.00 Principal Place of Business Mailing Address 6183 N.W. 120TH TERR. 6183 N.W. 120TH TERR. CORAL GABLES FL 33076 CORAL GABLES FL 33076-1910 1:0004202 SPRINGS SPRINGS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 65-0928472 City & State CORAL SPRINGS FL Not Applied to \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WALLBERG & RENZY, P.A. Street Address (P.O. Box Number is Not Acceptable) 10100 W. SAMPLE RD., STE. 311 **CORAL SPRINGS FL 33065** 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. DATE 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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change CAME ☐ Delete TITLE TITLE NAME RENZY, RON NAME STREET ADDRESS STREET ADDRESS 6183 N.W. 120TH TERR. CORAL SPRINGS FL 33076 SAME MChange CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES_FL 33076 ☐ Delete TITLE TITLE NAME NAME RENZY, RON CORAL SPAIN 95 FL. 33076 Teven VAILE Change Addition STREET ADDRESS STREET ADDRESS 6183 N.W. 120TH TERR. CITY-ST-ZIP CITY-ST-7IP CORAL GABLES FL 33076 TITLE Delete' TITL F Steven VAILE 727 BARCEIONA DR. NAME NAME STREET ADDRESS STREET ADDRESS BOCA RATON FL. 33432 CITY-ST-ZIP CITY-ST-ZIP DLAN BRIENCEL TITLE TITLE ☐ Delete ALAN BRIENDEL 5692 BOYNTON CRESENT NAME NAME STREET ADDRESS STREET ADDRESS BOYOTON BEACH FL 33437 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete TITLE ☐ Change Addition TITLE NAME 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 supplied with an address, with all other like empowered.

Indicated on this report or supplied in the limit of the corporation 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

CENZY 1/1/00 954.340!