AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S02665

1. Entity Name

~~CORONADO REAL ESTATE, INC.~~

HOUSING TRUST GROUP OF CENTRAL FLORIDA, INC.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED
01 OCT -1 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
~~2105 PARK AVENUE, NORTH~~ ~~WINTER PARK FL 32789~~ ~~US~~ 455 DOUGLAS AVE. SUITE 1255 ALTAMONTE SPRINGS, FL 32714	~~P.O. BOX 1061~~ ~~ORLANDO FL 32802-1061~~

2. Principal Place of Business	3. Mailing Address
~~395 Douglas Avenue~~	
Suite, Apt. #, etc. ~~Suite 2100~~	Suite, Apt. #, etc.
City & State ~~Altamonte Springs, FL~~	City & State
Zip ~~32714~~ Country	Zip Country

4. FEI Number 59-3041997 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~B&C CORPORATE SERVICES OF CENTRAL FLORIDA~~ ~~390 NORTH ORANGE AVENUE~~ ~~SUITE 1100~~ ~~ORLANDO FL 32801~~	Name: TONY B. JOHNSON Street Address (P.O. Box Number is Not Acceptable): 125 GENEVIEVE DR. City: ALTAMONTE SPRINGS FL Zip Code: 32701

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 Tony B. Johnson TONY B. JOHNSON 9/26/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

600004136686--3
-01274-01--01021--002
****150.00 ~~****150.00~~

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST JOHNSON, TONY B 2105 PARK AVENUE, NORTH WINTER PARK FL 32789	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 455 DOUGLAS AVE, # 1255 ALTAMONTE SPRINGS, FL 32714
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition D RICHARD P. GRAMMIG 455 DOUGLAS AVE, # 1255 ALTAMONTE SPRINGS, FL 32714
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 000004625510--5 -10/05/01--01081--020 *****61.25 ~~*****61.25~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 Tony B. Johnson 9/26/01 407/389-9794

Electronic Filing Menu Corporate Filing Menu Help