2001 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2001 8:00 am Secretary of State **DOCUMENT # 650317** 1. Entity Name SHALLOWAY, FOY, RAYMAN, & NEWELL, INC. 4-23-2001 90135 045 ***158.75 Principal Place of Business Mailing Address 1201 BELVEDERE RD. 1201 BELVEDERE RD. WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405 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 59-1959840 Not Applicable Zip Country Country **\$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 SHALLOWAY, K. DAN Street Address (P.O. Box Number is Not Acceptable) 1201 BELVEDERE RD. WEST PALM BEACH FL 33405 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 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 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. ☐ Addition ☐ Change ☐ Delete TITLE SHALLOWAY, K. DAN NAME NAME STREET ADDRESS STREET ADDRESS 1201 BELVEDERE RD. CITY-ST-ZIP CITY-ST-ZIP west palm beach fl Addition TITLE ٧S ☐ Delete TITLE ☐ Change NAME FOY, JAY G. NAME STREET ADDRESS STREET ADDRESS 1201 BELVEDERE RD. CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL VT ~> > · · · Change Addition TITLE ☐ Delete TITLE NAME RAYMAN, G.M. NAME STREET ADDRESS STREET ADDRESS 1201 BELVEDERE RD. CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL Change ☐ Addition ☐ Delete TITLE TITLE **NEWELL, WARREN** NAME NAME STREET ADDRESS 1201 BELVEDERE RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W. Palm Beach Fl ☐ Delete ☐ Change ☐ Addition TITI F TITLE JACKSON, KEITH B NAME NAME STREET ADDRESS 1201 BELVEDERE ROAD STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP W. PALM BEACH FL 33405 Delete TITLE TITLE ☐ Change ☐ Addition LAMOTTE, BRIAN J NAME NAME 1201 BELVEDERE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33405

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/01

(361)6557151

FILED

Daytime Phone #