2002 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 29, 2002 8:00 am Secretary of State DOCUMENT # F97000004040 1. Entity Name 04-29-2002 90020 002 ***150.00 DOWNTOWN PROPERTIES OF PA, INC. Principal Place of Business Mailing Address 5 W. 10TH ST 5 W. 10TH ST **ERIE PA 16501 ERIE PA 16501** 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 Applied For 25-1111446 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VOGEL, JAMES D ESQ. Street Address (P.O. Box Number is Not Acceptable) 3936 TAMIAMI TRAIL N. STE. B ..NAPLES FL 34103 City Zip Code FŁ 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 title if applicable. (NOTE: Registered Agent signature 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, 2002 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 TITLE Delete TITLE ☐ Change ☐ Addition NAME BALDWIN, ARTHUR W NAME STREET ADDRESS 5 W. 10TH ST STREET ADDRESS CITY-ST-7IP **ERIE PA 16501** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME BALDWIN, GREGORY G NAME STREET ADDRESS 5 W. 10TH ST STREET ADDRESS CITY-ST-ZIP **ERIE PA 16501** CITY-ST-ZIP TITLE Delete~ JITLE. Change _____ NAME BALDWIN, JOHN R NAME STREET ADDRESS 5 W. 10TH ST STREET ADDRESS CITY-ST-ZIP **ERIE PA 16501** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME^{*} NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

CITY-ST-ZIP

SIGNATURE: