2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 23, 2001 8:00 am Secretary of State **DOCUMENT # F98097** 1. Entity Name UNIVERSITY CLUB OF WEST PALM BEACH, INC. -23-2001 90046 032 ***150.00 Principal Place of Business Mailing Address 3030 LBJ FRWY 700 3030 LBJ FRWY 700 P.O. BOX 819087 P.O. BOX 819087 535369 DALLAS TX 75381 DALLAS TX 75381 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 75-1844319 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition Delete TITLE TITLE HOWE. DOUGLAS NAME NAME STREET ADDRESS 3030 LBJ FRWY 700 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75234 Change Addition VD ☐ Delete TITLE LARGENT, DAVE NAME NAME STREET ADDRESS 3030 LBJ FRWY 700 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75234 Change ☐ Addition TITLE ☐ Delete TITLE TAYLOR, RON NAME NAME 3030 LBJ FRWY 700 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP DALLAS TX 75234 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE HENSLEE, THOMAS NAME NAME 3036 LBJ FRWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75234 [7] Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition 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 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

3/22/01 912-243-619.