FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 13, 2001 8:00 am DOCUMENT # G94266 **Secretary of State** 1. Entity Name SEMINOLE ECONOMIC DEVELOPMENT, INC. 03-13-2001 90072 033 ***150.00 Principal Place of Business Mailing Address 6300 STIRLING ROAD 6300 STIRLING ROAD \$20769 % JIM SHORE % JIM SHORE HOLLYWOOD FL 33024 HOLLYWOOD FL 33024 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2642712 Not Applicable Country __Zip \$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 DORSKY, ERIC ESQ. Street Address (P.O. Box Number is Not Acceptable) 7320 GRIFFIN ROAD, SUITE 220 **DAVIE FL 33314** City 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 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 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PTD 🔀 Deiete TITLE ☐ Change Addition CR2E034 (10/00 E. Billie James SHORE, JIM NAME NAME Road 6300 Stirling STREET ADDRESS STREET ADDRESS 6300 STIRLING ROAD CITY-ST-ZIP CITY-ST-ZIP Hollywood F1 33024 HOLLYWOOD FL ... Jack Smi Di V.P. TITLE 🔀 Delete TITLE sack smith, sr. R+ 6 BOX 673 NAME MOTLOW, AGNES BILLIE NAME STREET ADDRESS STREET ADDRESS 6300 STIRLING ROAD OKeechobee FL 34974 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL D, S/T TITLE Delete TITLE Addition | Kichard Henry Rd Bldg K NAME OSCEOLA, MAX NAME STREET ADDRESS 6300 STIRLING ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP Tampa FL HOLLYWOOD FL Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREFT ADDRESS 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 TITLE ☐ Change ☐ Addition 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 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 the composition of the corporation or the receiver of trustee empowered to execute the corporation or an attaching with an address, with all other empowered.

SIGNATURE

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bille, Dra 3

28.01 954-966-6

Daytime Phone #