2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State
03-20-2001 90013 002 ****61.25

0045962

DOCUMENT # N19563

1. Entity Name

SAWGRASS INTERNATIONAL CORPORATE PARK ASSOCIATIO

Principal Place of Business	Mailing Address
6400 N. ANDREWS AVE. FT. LAUDERDALE FL 33309	6400 N. ANDREWS AVE. 4TH FLOOR FT. LAUDERDALE FL 33309 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
300 SE 2nd Street	300 SE 2nd Street
Suite, Apt. #, etc.: 8th Floor	Suite, Apt. #, etc.: 8th Floor
City & State: Ft. Lauderdale,FL	City & State: Ft. Lauderdale, FL
Zip: 33301 Country:	Zip: 33301-1907 Country:

4. FEI Number: 65-0043186 ☐ 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
DUKE, BRYAN C/O STILES CORPORATION 6400 N ANDREWS AVE FT. LAUDERDALE FL 33309	Name: Patricia A. Jones Street Address (P.O. Box Number is Not Acceptable): 300 SE 2nd Street 8th Floor City: Ft. Lauderdale **FL** Zip Code: 33301-1907

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 _____ 3-14-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SIEGEL, DAVID 6400 N. ANDREWS AVE. 4TH FL FORT LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P David Siegel 300 SE 2nd Street, 8th FL Ft. Lauderdale, FL 33301-1907	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BURTON, MEL 6400 N ANDREWS AVE., 4TH FLOOR FT LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Mel Burton 300 SE 2nd Street 8th FL Ft. Lauderdale, Fl 33301-1907	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD STILES, TRESA 6400 N. ANDREWS AVE., 4TH FLOOR FT. LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Jeremy Anderson 300 SE 2nd Street, 8th FL Ft. Lauderdale, FL 33301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CASTRO, DOMINGO 6400N. ANDREWS AVEN. 4TH FL FORT LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Robert Rodriguez 300 SE 2nd Street, 8th FL Ft. Lauderdale, FL 33301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GONZALEZ, MANNY 6400 N ANDREWS AVENUE 4TH FLOOR FT LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Manny Gonzalez 300 SE 2nd Street 8th FL Ft. Lauderdale, FL 33301-1907	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3-13-01 9546629300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #