2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 04, 2000 8:00 am Secretary of State DOCUMENT # N9900005299 1. Entity Name ABACOA TOWN CENTER PHASE TWO PROPERTY OWNERS' AS 05-04-2000 90091 019 ****61.25 Principal Place of Business Mailing Address 222 LAKEVIEW AVENUE 17TH FLOOR 222 LAKEVIEW AVENUE 17TH FLOOR WEST PALM BEACH FL 33401-6150 WEST PALM BEACH FL 33401 CMCD 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 -094 937 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) REGSERV CORP. 222 LAKEVIEW AVENUE 17TH FLOOR WEST PALM BEACH FL 33401 Zip Code City statement for the ourgoes of changing its registered office or registered agent, or both, in the state of Florida. 8. The above named entity submits Corp SIGNATURE By Mark Nussbaum, Vice President (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** Mav Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME DE GUARDIOLA, GEORGE STREET ADDRESS STREET ADDRESS 222 LAKEVIEW AVENUE 17TH FLOOR CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 D/ P/ T Change ☐ Addition D/P/T TITLE TITLE ☐ Delete NAME Patrick J. DiSalvo NAME DISÁLVO, PATRICK J STREET ADDRESS 222 Lake view Avenue, 17th Floor STREET ADDRESS 222 LAKEVIEW AVENUE 17TH FLOOR West Palm Beach, FL 33401 CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33401 D/V/S HEDGE, SCOTT A D/V/S Change ☐ Addition ☐ Delete TITLE TITLE Hedge, Scott A NAME NAME STREET ADDRESS STREET ADDRESS 222 LAKEVIEW AVENUE 17TH FLOOR 222 Lakeview Avenue, 17th Floor CITY-ST-ZIP West Palm Beach, FL 33401 CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE 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 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 of the secure 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 attachme with all other like empowered REQUIRED

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick J. DiSalvo Vice President