2002 UNIFORM BUSINESS REPORT (UBR)

May 27, 2002 8:00 am Secretary of State P00000097911 DOCUMENT # 05-27-2002 90319 032 ***150 00 GALE & WENTWORTH LICENSE HOLDING, INC. Principal Place of Business Mailing Address 9055 IBIS BLVD. 9055 IBIS BLVD. WEST PALM BEACH FL 33412 WEST PALM BEACH FL 33412 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 58-2576942 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -7. Name and Address of New Registered Agent - - - -6. Name and Address of Current Registered Agent - ---George G. Speer B & C CORPORATE SERVICES OF CENTRAL FL O Box Number is Not Acceptable) 390 N ORANGE AVE STE 1100 ORLANDO FL 32801 33412 West Palm Beach 8. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. April 29, 2002 George G. Speer, CFO **SIGNATURE** ne of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE Delete TITLE KITSON, SID NAME NAME 9055 IBIS BLVD. STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33412 SITY-ST-ZIP CITY-ST-7IP **VPD** Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS LEEDER, MIKE NAME 9055 IBIS BLVD STREET ADDRESS WEST PALM BEACH FL 33412 CITY-ST-ZIP CITY-ST-ZIP Change Addition **VPD** TITLE Delete TITLE SPEER, GEORGE G NAME NAME 9055 IBIS BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33412 CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

with all other like empowered.

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

REQUIGEORGE G. Speer

FILED

(561)630 - 7400

04/29/02