FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 26, 2002 8:00 am Secretary of State P01000005480 DOCUMENT # 1. Entity Name STRASSER PROPERTIES OF ORLANDO, INC. 02-26-2002 90107 045 ***150.00 Principal Place of Business Mailing Address 1255 MASON AVENUE 1255 MASON AVENUE DAYTONA BEACH FL 32117 DAYTONA BEACH FL 32117 2. Principal Place of Business Mailing Address DO NOT WRITE IN THIS SPACE City & State Applied For Not Applicable \$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 SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE **CORAL GABLES FL 33134** 8. The above nan submits this statement for the purpose of changing its registered office or registered agent, or both, SIGNATURE (NOTE: Registered Agent signature required when reinstating) d agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 PD CR2E034 (9/01) TITLE ☐ Delete TITLE Change Addition STRASSER, CHARLES L NAME NAME 1255 MASON AVENUE-STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32117 CITY-ST-ZIP CITY-ST-ZIP VD TITLE ☐ Delete TITLE ☐ Addition STRASSER, SCOTT NAME NAME STREET ADDRESS 1255 MASON AVENUE STREET ADDRESS DAYTONA BEACH FL 32117 CITY-ST-ZIP CITY-ST-ZIP STD TITLE ☐ Delete TITLE nange ☐ Addition STRASSER, CHARLES H NAME NAME 1255 MASON AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32117 CITY-ST-ZIP ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE:

changed, or on an attachment with

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 type empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if