

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

RECORDATION
APR 24 1995



FLORIDA DEPARTMENT OF STATE
JENNIFER M. HARTMAN
SECRETARY OF STATE

MAY 11 PM 9:15

DOCUMENT # P93000063136 (4)

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

HCP III ST. PETERSBURG, INC.

1. Principal Office Address PO BOX 1670 CLEMMONS NC 27012		2a. Mailed Address PO BOX 1670 CLEMMONS NC 27012		3. (Date of Incorporation) 09/09/1993		3a. (Date of Last Report) 08/24/1994	
2. Principal Office Address 21 6000 Meadowbrook Mall Suite 200 Clemmons, NC		2a. Mailed Address 26 6000 Meadowbrook Mall Suite 200 Clemmons, NC		4. FIC Number 56-1843290		Agreed For Not Applicable	
22. 200		27. 200		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Clemmons, NC		28. 200		6. Election Campaign Financing ☐		\$5.00 May Be Added to Fees	
24. 27012		25. US		29. 200		30. 200	
9. Name and Address of Current Registered Agent CAPITAL CONNECTION, INC. 417 E VIRGINIA ST SUITE 1 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent 81 Name 82 Street Address (If Different from Mailed Address, Not Applicable) 83 84 City 85 State			

11. Declaration: The undersigned, the president or secretary of the corporation, hereby certifies that the information furnished herein is true and correct to the best of his or her knowledge and belief, and that the corporation is duly organized and validly existing under the laws of the State of Florida, and that the corporation is authorized to file this statement for the purposes of changing its registered office or registered agent or both in the State of Florida. Such information was submitted by the corporation to its board of directors, and the board of directors has approved the information as true and correct to the best of its knowledge and belief, and that the corporation is authorized to file this statement for the purposes of changing its registered office or registered agent or both in the State of Florida.

STATE OF FLORIDA

12. OFFICIAL REGISTERED AGENTS		13. ADDITIONAL REGISTERED AGENTS	
12.1 NAME 12.2 ADDRESS 12.3 CITY 12.4 STATE 12.5 ZIP	D ANGELL, DON G 6000 MARKET SQUARE CLEMMONS NC 27012	13.1 NAME 13.2 ADDRESS 13.3 CITY 13.4 STATE 13.5 ZIP	C W. Stewart Swan 6000 Meadowbrook Mall, Ste 200 Clemmons, NC 27012
12.1 NAME 12.2 ADDRESS 12.3 CITY 12.4 STATE 12.5 ZIP		13.1 NAME 13.2 ADDRESS 13.3 CITY 13.4 STATE 13.5 ZIP	P Laverne P. Herzog 2415 S. Volusia Ave, Ste A-4 Orange City, FL 32763
12.1 NAME 12.2 ADDRESS 12.3 CITY 12.4 STATE 12.5 ZIP		13.1 NAME 13.2 ADDRESS 13.3 CITY 13.4 STATE 13.5 ZIP	M. Rebecca Muenchow 6000 Meadowbrook Mall, Ste 200 Clemmons, NC 27012
12.1 NAME 12.2 ADDRESS 12.3 CITY 12.4 STATE 12.5 ZIP		13.1 NAME 13.2 ADDRESS 13.3 CITY 13.4 STATE 13.5 ZIP	Foye J. Hutchins 6000 Meadowbrook Mall, Ste 200 Clemmons, NC 27012

14. Declaration: I, the undersigned, hereby declare that the information furnished herein is true and correct to the best of my knowledge and belief, and that the corporation is duly organized and validly existing under the laws of the State of Florida, and that the corporation is authorized to file this statement for the purposes of changing its registered office or registered agent or both in the State of Florida. Such information was submitted by the corporation to its board of directors, and the board of directors has approved the information as true and correct to the best of its knowledge and belief, and that the corporation is authorized to file this statement for the purposes of changing its registered office or registered agent or both in the State of Florida.

SIGNATURE:

M. Rebecca Muenchow
SIGNATURE AND TYPE OF OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

910-712-0444