FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -8 PM 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # P94000049241

1. Corporation Name
INTEGROUP DEVELOPMENT CORP.

Principal Place of Business / Mailing Address
7077 Bonneval Road
Suite 300 One Harbert Center
Jacksonville, FL 32216

3. Date Incorporated or Qualified: 06/29/94
3a. Date of Last Report:

2. Principal Place of Business
21 7077 Bonneval Road
Suite, Apt. #, etc.
22 Suite 450
City & State
23 Jacksonville, FL
Zip 24 32216 Country 25 US

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-3263552 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
F&L Corp.
200 Laura Street
Jacksonville, FL 32202

10. Name and Address of New Registered Agent
01 Name: Buckley, Ronald F.
02 Street Address (P.O. Box Number is Not Acceptable): 7077 Bonneval Road
03 Suite 450
04 City: Jacksonville FL 05 Zip Code: 32216

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Ronald F. Buckley — May 5, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	Van Mook, A.L. "Ton"
STREET ADDRESS	7077 Bonneval Rd,One Harbert Center #300
CITY-ST-ZIP	Jacksonville, FL 32216
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D ☒ Change ☐ Addition
1.2 NAME	Van Mook, A.L. "Ton"
1.3 STREET ADDRESS	7077 Bonneval Rd, #450
1.4 CITY-ST-ZIP	Jacksonville, FL 32216
2.1 TITLE	P ☐ Change ☒ Addition
2.2 NAME	Buckley, Ronald F.
2.3 STREET ADDRESS	7077 Bonneval Rd, #450
2.4 CITY-ST-ZIP	Jacksonville, FL 32216
3.1 TITLE	VP ☐ Change ☒ Addition
3.2 NAME	Garripee, Lester
3.3 STREET ADDRESS	7077 Bonneval Rd, #450
3.4 CITY-ST-ZIP	Jacksonville, FL 32216
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	200001481762
4.3 STREET ADDRESS	-05/09/95--01146--006
4.4 CITY-ST-ZIP	****450.00 ****225.00
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	200001481762
5.3 STREET ADDRESS	-05/09/95--01146--007
5.4 CITY-ST-ZIP	*****17.50 *******8.75
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ronald F. Buckley — May 5, 1995 — (904) 296-2970
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #