2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am Secretary of State P95000037891 DOCUMENT # 1. Entity Name CGT PROPERTIES, INC. 05-28-2002 91775 032 ***158.75 Principal Place of Business Mailing Address 777 SOUTH FLAGLER DRIVE STE 310 777 S. FLAGLER DRIVE WEST PALM BEACH FL 33401 **SUITE 1101** WEST PALM BEACH FL 33401 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FE! Number Applied For 65-0649854 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SILVESTRI, LAWRENCE A Street Address (P.O. Box Number is Not Acceptable) 777 S FLAGLER DR SUITE 1101E WEST PALM BEACH FL 33401 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, **VPS** TITLE ☐ Delete TITLE ☐ Change Addition GEIST, MINNIE S. NAME NAME STREET ADDRESS 777 S FLAGLER DRIVE STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL CITY-ST-ZIP TITLE AS ☐ Delete TITLE Change Addition NAME GARVIN, DORANNE NAME STREET ADDRESS 777 S FLAGLER DRIVE STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition ÷NAME SHEWALTER, WILLIAM A NAME STREET ADDRESS 777 S FLAGLER DR, SUITE 1101E STREET ADDRESS CITY-ST-ZIP **WEST PALM BEACH FL 33401** CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME SILVESTRI, LAWRENCE A NAME STREET ADDRESS 777 S. FLAGLLER DRIVE SUITE 1101E STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

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