2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 04, 2001 8:00 am Secretary of State **DOCUMENT # S09108** 1. Entity Name SDB LEASING CORP. 05-04-2001 90075 001 ***150.00 Principal Place of Business Mailing Address 702 NORTH FRANKLIN STREET 702 NORTH FRANKLIN STREET TAMPA FL 33602 TAMPA FL 33602 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. FEI Number Applied For 59-3033667 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCDEVITT, SHEILA M Street Address (P.O. Box Number is Not Acceptable) 702 NORTH FRANKLIN STREET **TAMPA FL 33602** 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. XX Change TITLE ☐ Delete TITLE Addition Blume, S.G. NAME NAME BLUME, STEPHEN G 702 North Franklin Street STREET ADDRESS STREET ADDRESS 170 MARINA DEL REY COURT CITY-ST-ZIP CITY-ST-ZIP Tampa, FL **CLEARWATER FL 33767** 33602 TITI F ☐ Delete TITL F XX Change ☐ Addition NAME BLUME, DARYL W NAME Blume, D.W. STREET ADDRESS 7306 SAWGRASS POINT DRIVE STREET ADDRESS 702 North Franklin Street CITY-ST-7IP PINELLAS PARK FL 33782 CITY-ST-ZIP Tampa, FL 33602 XX Delete TITLE TITL F Change XX Addition Schwartz, D.E. NAME DEMA, ANTHONY N NAME STREET ADDRESS 7751 ARALIA WAY STREET ADDRESS 702 North Franklin Street CITY-ST-ZIP CITY-ST-7IP LARGO FL 33777 Tampa, FL 33602 TITLE ☐ Delete TITLE Change ☐ Addition NAME CANTRELL, W N NAME STREET ADDRESS STREET ADDRESS 702 NORTH FRANKLIN STREET CITY-ST-ZIP CITY-ST-7IP TAMPA FL 33602 TITLE ☐ Delete TITLE Change ☐ Addition NAME EUSTACE, R K NAME STREET ADDRESS STREET ADDRESS 702 NORTH FRANKLIN STREET CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** TITLE Delete TITLE TDXX Change ☐ Addition NAME GILLETTE, G L NAME

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.

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNI IG OFFICER OR DIRECTOR

702 NORTH FRANKLIN STREET

TAMPA FL 33602

D. Ε. Schwartz

228-1808