DOCUMENT # V47669 1. Entity Name SETON REALTY, INC.					Feb 04, 2002 8:00 am Secretary of State 02-04-2002 90471 001 ***985.00	
Principal Place of Business C/O LAURIE S TEPPERT 1801 BARRS STREET. SUITE 615 JACKSONVILLE FL 32204 US		Mailing Address C/O LAURIE S TEPPERT 1801 BARRS STREET. SUITE 615 JACKSONVILLE FL 32204 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.		4. 1	FEI Number 59-3133073 Applied For Not Applicable	
Zip Country		Zip Country		5. (Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current Re	egistered Agent		7. 1	Name and Address of New Registered Agent	
			Name			
TEPPERT, LAURIE S GENERAL COUNSEL			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
1801 BARRS STREET, SUITE 615						
JACKSONVILLE FL 32204			City		FL Zip Code	
8. The above	named entity submits this statement for t	Televille if applicable. (NOTE: Re	HUR egistered Agent signature requ	IES	TEPPERT 1-22-02	
 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FÊE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta		State	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. □ Added to Fees	
11.	OFFICERS AND D	IRECTORS	12.	ΑĒ	DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAHER, JOHN J 1801 BARRS STREET, SUITE 600 JACKSONVILLE FL 32204	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOGUE, JOHN W 1800 BARRS STREET JACKSONVILLE FL 32204	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CORRIGAN, JAMES M 1801 BARRS STREET, SUITE 600 JACKSONVILLE FL 32204	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PERRY, KENNETH C 1800 BARRS STREET JACKSONVILLE FL 32204	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition (
TITLE NAME	VP PERRY, LINDA 1800 BARRS STREET	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	

2002 UNIFORM BUSINESS REPORT (UBR)

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

JACKSONVILLE FL 32204

JACKSONVILLE FL 32204

1801 BARRS STREET, SUITE 600

SINCLAIR, DONNA

SECULIA SILVANO SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING

☐ Delete

Change

☐ Addition