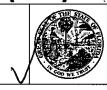
2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N48448

1. Entity Name

THE GENTLEMEN OF THE GARDEN, INC.



FILED Apr 21, 2003 8:00 am Secretary of State

04-21-2003 90503 042 ****70.00

Applied For Not Applicable

Principal Place of Business

2000 PALM BEACH LAKES BLVD., #300 WEST PALM BEACH FL 33409

Mailing Address

2000 PALM BEACH LAKES BLVD., #300 WEST PALM BEACH FL 33409

| 2. Principal Place of Busin 2090 Palm | ness Beach Lakes | 3. Mailing Address 2090 Palm B | each Lakes | | | | |
|--|-----------------------|---|-----------------------|--|--------------------------------|--|--|
| Suite, Apt. #, etc. 700 | | Suite, Apt. #, etc. 700 | | CHECK HERE IF MA | AKING CHANGES | | |
| City & State West Palm | Beach, FL | City & State West Palm B | each, FL | 4. FEI Number 65-0352074 | Applied F | | |
| Zip 33409 | Country USA | Zip 33409 | Country USA | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | | | |
| WAUTE LOURS OF | e Service | £ 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Name | era u john zu zu di preje re a je | | | |
| WHITE, JOHN III 1645 PALM BEACH LAKES BLVD. SUITE 1200 | | | Street Address | Street Address (P.O. Box Number is Not Acceptable) | | | |
| WEST PALM BEACH | ł FL 33401 | | | | 1 = | | |

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. I am familiar with, and accept the obligations of registered agent.

| SIGNATURE . | | | |
|-------------|--|---|-------------|
| | Signature, typed or printed name of registered agent and title if applicat | ble. (NOTE: Registered Agent signature required when reinstating) | DATE |
| •, | , | | |
| • | ». | • | |

| FILE NOW: FEE IS \$61.25 | 9. Election Campaign Financing Trust Fund Contribution. | \$5.00 May Be Added to Fees | Mai Florid |
|--------------------------|---|--------------------------------|---------------|
| | | 710000 10 1 000 | 1 10114 |

| NOW: FEE IS \$61.25 | 9. Election Campaign Financing Trust Fund Contribution. | | S5.00 May Be Added to Fees | | Make Check Payable to Florida Department of State | |
|------------------------|---|-------|----------------------------|-------------------|---|--|
| OFFICERS AND DIRECTORS | | 11. | | ADDITIONS/CHANGES | TO OFFICERS AND DIRECTORS IN 10 | |
| | □ Delete | TITLE | | | Change C Addition | |

| | | | | | | riorida Department or v | Jiane |
|----------------|-------------------------------------|-----------------|----------------|---------|---|--|------------|
| 4. | | <u></u> | | | | | |
| 10. | OFFICERS AND DIRECTORS | | 11. | ADDITIO | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE | PD | ☐ Delete | TITLE | | | ☐ Change | Addition |
| NAME | CAMERON-HAYES, J C | | NAME | | | | |
| STREET ADDRESS | 223 QUEENS LANE | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | PALM BEACH FL 33480 | | CITY-ST-ZIP | | | | |
| TITLE | TD | X Delete | TITLE | | | ☐ Change | ☐ Addition |
| NAME | RAWLS, GLENN | | NAME | | | | ł |
| STREET ADDRESS | 259 BARCELONA ROAD | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33401 | | CITY-ST-ZIP | | | | |
| TITLE . | SD | □ Delete - | TITLE | | | ☐ Change | Addition |
| NAME | white, John II | 21 2 | NAME | ~ ~~~~ | | The state of the s | |
| STREET ADDRESS | 1645 PALM BEACH LAKES BLVD., STE 13 | 2000 | STREET ADDRESS | | | | 1 |
| CITY-ST-ZIP | WEST PALM BEACH FL 33401 | | CITY-ST-ZIP | | | | Ì |
| TITLE | VD | ☐ Delete | TITLE | | | Change | Addition |
| NAME | DEGRAY, WILLIAM | | NAME | | | _ · | _ |
| STREET ADDRESS | 110 SEAGATE | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | PALM BEACH FL 33480 | | CITY-ST-ZIP | | | | |
| TITLE | D | ☐ Delete | TITLE | | | ☐ Change | ☐ Addition |
| NAME | TODD, JOHN | | NAME | | | - | J |
| STREET ADDRESS | 250 POTTER ROAD | | STREET ADDRESS | | | | } |
| CITY-ST-ZIP | WEST PALM BEACH FL 33405 | | CITY-ST-ZIP | | رط | | Í |
| TITLE | 0 | ☐ Delete | TITLE | | | ☐ Change | Addition |
| NAME | KOONS, JEFF | | NAME | | | | _ |
| STREET ADDRESS | 201 LINDA LANE | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33405 | | CITY-ST-ZIP | | | | |

12. 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 reports 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a address, with all other like empowered.

SIGNATURE:

April 16, 2003 561-686-6968