2000 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2000 08:00 AM **DOCUMENT # 131614** 1. Entity Name **Secretary of State** KENYON DODGE, INC. Principal Place of Business Mailing Address 19400 U.S. 19 NORTH 110 SE 6TH STREET P.O. DRAWER 4580 20TH FLOOR CLEARWATER ET LAUDERDALE FL FL 346184445 33301 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 59-0479520 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT COPORATION SYSTEM 1200 SOUTH PINE ISLAND RD Street Address (P.O. Box Number is Not Acceptable) PLANTATION \mathbf{FL} 33324 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. 04/11/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change X Addition NAME NAME FERRANDO JONATHAN STREET ADDRESS STREET ADDRESS 110 SE 6TH STREET, 20TH FLOOR CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL. 33301 TITLE ☐ Delete TITLE X Change ☐ Addition NAME KATHLEEN NAME HVLE BOURHIS MARC T. STREET ADDRESS 110 SE 6TH STREET, 20TH FLOOR STREET ACCRESS 110 SE 6TH STREET, 20TH FLOOR CITY-ST-ZIF FL 33301 FT LAUDERDALE CITY-ST-7IP FT LAUDERDALE FT. 33301 TITLE ☐ Deiete TILE X Change ☐ Addition NAME WILKERSON SCOTT NAME SALHANY RONALD STREET ADDRESS 110 SE 6TH STREET, 20TH FLOOR 110 SE 6TH STREET, 20TH FLOOR STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE 33301 CITY-ST-ZIP FT LAUDERDALE 33301 TITLE DSV ☐ Defete TITLE D/VP X Change ☐ Addition NAME COLE **JAMES** O NAME FERRANDO JONATHAN P STREET ADDRESS 110 SE 6TH STREET, 20TH FLOOR 110 SE 6TH STREET, 20TH FLOOR STREET ADDRESS FT LAUDERDALE CITY-ST-ZIP FT LAUDERDALE 33301 CITY-ST-ZIP FL. 33301 FL. TITLE ☐ Delete TITLE X Change ☐ Addition NAME HAWKINS THOMAS NAME MAROONE MICHAEL 110 SE 6TH STREET, 20TH FLOOR 110 SE 6TH STREET, 20TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33301 FT LAUDERDALE FL33301 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/8

FILED

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.

CICALATURE. IONATHAND PEDDANDO