2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 14, 2000 8:00 am Secretary of State **DOCUMENT # 263744** SNAPPER CREEK MARINA, INC 02-14-2000 90022 024 ***150.00 Principal Place of Business Mailing Address 11190 SNAPPER CREEK RD 11190 SNAPPER CREEK RD UUULULAI MIAMI FL 33156 CORAL GABLES FL 33156-4216 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1030262 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FOGLE, LEWIS H. Street Address (P.O. Box Number is Not Acceptable) 10415 SW 53RD AVE. **MIAMI FL 33156** Zip Code City 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 it applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Voell, David B. X Change PD ☐ Delete TITLE ☐ Addition TITLE NAME TITLEY, ROGER W. NAME President STREET ADDRESS STREET ADDRESS -5290-SW-99TH-TERRACE 5230 Oak Lane CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Coral Gables, FL 33156 TITLE Change Addition ☐ Delete TITLE NAME BONNER, R. LAWRENCE NAME STREET ADDRESS STREET ADDRESS 10201 SW 53RD AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL X Change ☐ Addition TITLE TITLE ☐ Delete Director NAME NAME HIRCH, M.D. NATHAN STREET ADDRESS STREET ADDRESS 10801 SNAPPER CREEK ROAD Coral Gables, FL 33156 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Director X7 Change ☐ Addition D TITLE ☐ Delete Betancourt, Hector J. NAME SPILLIS, PETER J NAME 10200 Old Cutler Road STREET ADDRESS 40700 SNAPPER CREEK ROAD-STREET ADDRESS CUTY-ST-ZIP CITY-ST-ZIP Coral Gables, FL 33156 CORAL GABLES FL ☐ Addition ☐ Change ☐ Defete TITLE TITLE BATTLE, MICHAEL W. MARKE STREET ADDRESS STREET ADDRESS 10745 SW 53 AVE CITY-ST-7IP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Change ☐ Delete TITLE TITLE OLEN, RANDY J. NAME NAME STREET ADDRESS STREET ADDRESS 10725 SW 53 AVE.

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.

CITY-ST-ZIP

SIGNATURE:

CORAL GABLES FL

02/07/00

(305)661-0505