2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Aug 23, 2005 8:00 am Secretary of State

305-662-5427

Daytime Phone #

8/18/05

DOCUMENT # 290351 1. Entity Name FIRST NATIONAL SOUTH MIAM! SAFE DEPOSIT COMPANY							08-23-2005 90011 022 ***550.00					
Principal Place of Business Mailing Address					 				Enn	1000		
5750 SUNSET DRIVE South Miami, FL 33143			5750 SUNSET DRIVE South Miami, FL 331					50062929				
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				07132005	Chg-P	CR2E03	4 (10/03)		
City & State			City & State			4. FEI Numbe 59-108		Applied For Not Applicable				
Zip	Country		Zip Coun		try	5. Certificate of Status		of Status Desired		8.75 Add ee Require		
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
SIBLEY,, CURTISS F 1201 SAN IGNACIO AVENUE					Name Drew A. Dammeier Street Address (P.O. Box Number is Not Acceptable)							
CORAL GABLES, FL 33146					Street Address (P.O. Box Number is Not Acceptable) 5750 Sunset Drive							
		City			Miami		FL	Zip Coq	θ/, 3			
The above named eptity submits this statement for the purpose of changing its registered of								h. in the State of Flo				
the obligati	ions of regist	ered agent.	Sur-					,				
SIGNATURE Spature, typed or printed registered agent and little if applicable. (NOTE: Registered							h		8/18	/05		
	agnature, typed	or printed runner or registered agent a	molphe ir applicable. (NO)	t: negistere	d Agent signar	nua tadraxea	when reinstating)		DATE			
		FFE IS \$550.00 stemper 7, 2005	9. Election Campa Trust Fund Con		ncing	\$5. Add	00 May Be ed to Fees					
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFFI	CERS AND I	DIRECTORS	S IN 11	
TITLE	S	ADTILLO	□ Delete	E .	S			:	Change	☐ Addition		
NAME STREET ADDRESS	190 SUNF	N, ARTHÚR RISE AVE		e Et adoress		ald F. Hunter						
CITY-ST-ZIP	CORAL G	ABLES, FL 33133		-ST-ZIP	Eder	5 Hilloway Road n Prairie, MN 55347						
TITLE	P		⊠ Oelete	TITL		P			:	K Change	Addition	
NAME STREET ADDRESS	SIBLEY, 0	NAM STRE	E Et adoress	Drew A. Dammeier								
CITY-ST-ZiP	CORAL GABLES, FL 33146					5/50 Sout) Sunset th Miami	Drive FL 33143				
TITLE	D	_	☐ Delete	TITU	<u> </u>					☐ Change	Addition	
NAME Street adoress		HUR, BRUCE TH LAKE SHORE DRIV	E	NAM	E Et address							
CITY-ST-ZIP	1), IL 60611	-		-ST-ZIP							
IIIE			☐ Delete	TITE	E					Change	Addition	
NAME				NAM								
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZIP							
TITLE	<u> </u>		☐ Delete	TITL	<u> </u>					☐ Change	Addition	
NAME				NAM	_					_		
STREET ADDRESS : CITY-ST-ZIP					et address -st-zip							
TITLE			☐ Delete	TITL						☐ Change	Addition	
NAME				NAM	E					•		
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZIP							
	ertify that th	e information supplied with	this filing does not qualify fo			ted in Se	ction 119.07(3)	i), Florida Statutes, I	further certif	fy that the in	nformation	
indicated of the cor changed,	on this repo poration or th or on an atti	rt or supplemental report is ne receiver or trustee empo achment with an address v	this filing does not qualify for true and accurate and that twered to execute this report with all other the emocward	my signa t as requi	ture shall h Ired by Cha ⊋	ave the sapter 607	same legal effec , Florida Statute	t as if made under o s; and that my name	eath; that I are appears in	n an officer Block 10 o	or director Block 11 if	