2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 523832

1. Entity Name

6767 NORTH OCEAN BOULEVARD, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90074 034 ***150.00

Principal Place of Business	Mailing Address
6767 N. OCEAN BLVD. OCEAN RIDGE FL 33435	6767 N. OCEAN BLVD. OCEAN RIDGE FL 33435-3394

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1855761 — Applied For / Not Applicable

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
CHAPIN, ROBERT D. 1201 NE 8TH ST DELRAY BEACH FL 33444	Name Street Address (P.O. Box Number is Not Acceptable) City — FL — Zip Code

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 if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	~~CANNON, GEORGE W.~~	NAME	CANNON,George W.,Jr.
STREET ADDRESS	6767 N. OCEAN BLVD	STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	CITY-ST-ZIP	
TITLE	~~D~~ ☐ Delete	TITLE	SD ☒ Change ☐ Addition
NAME	GARTHWAITE, ANN B	NAME	
STREET ADDRESS	6767 N. OCEAN BLVD	STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	CITY-ST-ZIP	
TITLE	VD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KNIGHT, ROBERT H.	NAME	
STREET ADDRESS	6767 N. OCEAN BLVD	STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	CITY-ST-ZIP	
TITLE	~~D~~ ☒ Delete	TITLE	D ☒ Change ☐ Addition
NAME	~~STIMPSON, HARRY F., JR.~~	NAME	ALEXANDER, Quentin
STREET ADDRESS	~~6767 N. OCEAN BLVD.~~	STREET ADDRESS	6767 N Ocean Blvd
CITY-ST-ZIP	~~OCEAN RIDGE FL~~	CITY-ST-ZIP	Ocean Ridge, FL 33435
TITLE	~~D~~ ☐ Delete	TITLE	TD ☒ Change ☐ Addition
NAME	REGAN, JOHN M JR	NAME	
STREET ADDRESS	6767 N OCEAN BLVD	STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (9/99)

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 another like empowered.

SIGNATURE: G.W. Cannon Jr. George W. Cannon, Jr. January 12,2000 (561)737-9557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #