2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 601095 Jan 19, 2000 8:00 am 1. Entity Name **Secretary of State** STOUTAMYER, STRATOS, SCHROEDER, WHALEY, RIZZO & 01-19-2000 90185 010 ***150.00 Principal Place of Business Mailing Address 2010 59TH STREET WEST SUITE 1500 2010 59TH STREET WEST SUITE 1500 **BRADENTON FL 34209-4649** BRADENTON FL 34209 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt # etc. Applied For City & State City & State 4. FEI Number 59-1266561 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHROEDER, K S Street Address (P.O. Box Number is Not Acceptable) 2010 59TH STREET WEST **SUITE 1500 BRADENTON FL 34209** 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 2017年1967日 安全经验 SIGNATURE DATE 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 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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. Addition TITLE ☐ Delete TITLE SCHROEDER, K.S. NAME NAME 2010 59TH STREET WEST SUITE 1500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Addition ☐ Change Delete TITLE TITLE STOUTAMYER, J.S. NAME NAME STREET ADDRESS 2010 59TH STREET WEST STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP BRADENTON FL ☐ Change ☐ Addition TITLE **X**'Délete TITLE STRATOS, M.S. NAME NAME STREET ADDRESS STREET ADDRESS 2010 59TH STREET WEST CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** DS ☐ Delete TITLE ☐ Change Addition TITLE NAME WHALEY, D.H. NAME 2010 59TH STEEET WEST SUITE 1500 STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP **BRADENTON FL 34209** Change ☐ Delete TITLE Addition TITLE RIZZO, ANTHONY J. NAME 2010 59TH STREET WEST SUITE 1500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Change Addition TITLE ☐ Delete TITLE BLAUSTEIN, PHILIP A NAME STREET ADDRESS 2010 59TH STREET WEST, SUITE 1500 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209**

13. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-00 241-113-9988

Daytime Phone #