2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2000 8:00 am Secretary of State **DOCUMENT # 642424** 1. Entity Name WILLIAM ZEIGLER PROPERTIES. INC. 05-01-2000 90007 050 ***150.00 Mailing Address Principal Place of Business 202 LINCOLN STREET 71 ELLINGTON STREET TALLAHASSEE FL 32301 EAST ORANGE NJ 07017-5502 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 59-1982532 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HUNTER, HENRY C Street Address (P.O. Box Number is Not Acceptable) 219 E. VIRGINIA STREET TALLAHASSEE FL 32301 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. 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 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PD ☐ Delete TITLE ☐ Change Addition TITLE WHITE, ZEIGLER O'SR. NAME NAME STREET ADDRESS STREET ADDRESS 3968 6TH AVENUE CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES CA 90008 Change ☐ Addition ☐ Delete TITLE TITLE WHITE, STANLEY Z NAME STREET ADDRESS STREET ADDRESS 6125 BEDFORD AVENUE CITY-ST-7IP CITY-ST-ZIP LOS ANGELES CA 90056 ☐ Change ☐ Addition ☐ Delete TITLE TOLLIVER, EVANGELINE W NAME NAME STREET ADDRESS STREET ADDRESS 3174 APACHE STREET CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33901 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME TRIMMINGS, LAURA W NAME STREET ADDRESS STREET ADDRESS 71 ELLINGTON STREET CITY-ST-ZIP CITY-ST-ZIP EAST ORANGE NJ 07017 Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

SIGNATURE:

SEGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-3-00 (979)266-5972

CR2E034 (9/99