2002 UNIFORM BUSINESS REPORT (UBR)

Mar 24, 2002 8:00 am Secretary of State **DOCUMENT # 706258** 03-24-2002 90054 030 ****61.25 SINGER ISLAND BUSINESS ASSOCIATION, INC. Principal Place of Business Mailing Address 1281 NORTH OCEAN DR 1281 NORTH OCEAN DR STE 109 STE 109 SINGER ISLAND FL 33404 SINGER ISLAND FL 33404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-6159379 Not Applicable Zip Country 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 Street Address (P.O. Box Number is Not Acceptable) STEWART, JAMES M. 1211 THE PLAZA SINGER ISLAND FL 33404 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** Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS TITLE TITLE PRESIDEN ☐ Delete NAME SCHNYER, DAVID NAME STREET ADDRESS 2631 PARK AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SINGER ISLAND FL 33404 I SECRETARY TITLE Change Delete TITLE MOODY, GOLDIE NAME NAME STREET ADDRESS STREET ADDRESS OCEAN AVE 182 LAKE DR 200 CITY-ST-ZIP CITY-ST-7IP SINGER ISL FL 33404 CIVIERA BEACH. TITLE TD ☐ Delete TITLE ☐ Addition NAME SUNDEEN, DEBBIE NAME STREET ADDRESS STREET ADDRESS 3800 N OCEAN DRIVE CITY-ST-ZIP CITY-ST-ZIP SINGER ISLAND FL 33404 ☐ Change ☐ Addition ☐ Delete TITLE STEWART, JAMES M NAME STREET ADDRESS 1211 THE PLAZA STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SINGER ISLAND FL 33404 TITLE TITLE ☐ Change ☐ Addition NAME Kappeler, Stephen NAME STREET ADDRESS STREET ADDRESS 3200 OCEAN AVENUE CITY-ST-ZIP CITY-ST-ZIP SINGER ISLAND FL 33404 TITLE ☐ Delete TITI F Change ☐ Addition MOODY, JAMES NAME NAME STREET ADDRESS 182 LAKE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SINGER ISLAND FL 33404

2. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECT

COTOR HORECHE 3-7-02 8

Daytime Phone #

FILED