2000 UNIFORM BUSINESS REPORT (UBR)

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Sute, Apt. #, etc. City & State Country Zip Country Zip Country S. Certificate of Status Deared \$6. Name and Address of Current Registered Agent Name CAPITAL CONNECTION, INC. 4. FEI Number of 2-1468688 Registered Agent Registered Agent Name CAPITAL CONNECTION, INC. 4. FEI Number of Registered Agent Registered Agent Name CAPITAL CONNECTION, INC. 4. FEI Number of Registered Agent Registered Agent City FL Zip Code TALLAHASSE FL 32301 City FL Zip Code City FL Zip Code TALLAHASSE FL 32301 THE ADDRESS	511 UNION STREET SUITE 2350 511 UNION STREET SUITE 2350 511 UNION STREET			0 tr					•
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6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAPITAL CONNECTION, INC. 417 EAST VIRGINIA STREET, SUITE ONE TALLAHASSEE FI, 32301 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	City & State City &		City & State	y & State		4. FEI Number	62-1468688		ble
S. Name and Address of Current Registered Agent CAPITAL CONNECTION, INC. 417 EAST VIRGINIA STREET, SUITE ONE TALLAHASSEE FL 32301 City City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. SIGNATURE Signature, isolar primar name of registered pairs and list in apparature registered agent, or both, in the State of Florida. SIGNATURE Signature, isolar primar name of registered pairs and list in apparature registered agent, or both, in the State of Florida. SIGNATURE Signature, isolar primar name of registered pairs and list in apparature registered agent, or both, in the State of Florida. SIGNATURE Signature, isolar primar name of registered pairs and list in apparature registered agent, or both, in the State of Florida. SIGNATURE A CAPITAL ASSOCIATES, L.P., LTD. SIGNATURE SIGNAT	'	Country	i '	Coun	itry	5. Certificate of	of Status Desired		7.
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TALLAHASSEE FL 32301 City FL Zip Code	·				Street Address (P.O. Box Number is Not Acceptable)				
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Signature, hyper or printed name of inequatived agent and stee if applicable (NOTE: Registered Agent alphanor inequative flower flower inequative flower inequative flower inequative flower	·								
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(416)254-0231

J Date

SIGNATURE: Љ∗

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTIER