2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9700002504 01 APR 27 PM 5: 35 THE CENTURY TITLE AGENCY, Ltd. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business 1555 Palm Beach Lakes Blv). Suite 1000 West Palm Beach, Fl 33401 Mailing Address 1555 Atla BEACL LAKES Blud. Suite 1000 WEST PALM BEACH, F1 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0795019 Not Applicable Country Zip Country Zip \$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 UNIVERSAL LAND TITLE, INC. Street Address (P.O. Box Number is Not Acceptable) 1555 PALM BEACH LAKES BLVD., SUITE 1000 WEST PALM BEACH FL 33401 City 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. (NOTE: Registered Agent signature required when reinstating) DATE 10. Amount of Capital Contributions 11 MAKE CHECK PAYABLE TO DEPT. OF STATE 9. Capital Contributions 5,<u>000</u>. 5,000 SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. 13. CR2E003 (11/00) DOCUMENT # H93554 STREET ADDRESS NAME UNIVERSAL LAND TITLE, INC. STREET ADDRESS 1555 PALM BEACH LAKES BLVD., SUITE 1000 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 DOCUMENT # STREET ADDRESS NAME 800004193778---2 STREET ADDRESS CITY-ST-7IP -05/10/01--01100--011 CITY-ST-ZIP ****150.00 ****150.00 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT 1 STREET ADDRESS NAME STREET ADD ESS CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

UNIVERSAL LAND TITLE INC. BY It'S PRESIDENT

APPROVE