2007 FOR PROFIT CORPORATION

INDIANAPOLIS, IN 46204

CITY-ST-ZIP

1331 F NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CRY-ST-7IP

FILED Mar 16, 2007 08:00 Al ANNUAL REPORT **Secretary of State** DOCUMENT # F0000004817 1. Entity Name FORT MYERS METRO 502 MANAGEMENT, INC. Principal Place of Business Mailing Address 201 NORTH ILLINOIS STREET, 23RD FLOOR 201 NORTH ILLINOIS STREET, 23RD FLOOR INDIANAPOLIS, IN 46204 INDIANAPOLIS, IN 46204 No Chg-P CR2E034 (11/05) 02212007 Applied For 4. FEI Number 35-2115530 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent the state of the s CIT CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. 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 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be 11000000669641 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. PST TITLE NAME. BROADBENT, GEORGE P 201 NORTH ILLINOIS STREET, 23RD FLOOR STREET ADDRESS CITY-ST-ZIP INDIANAPOLIS, IN 46204 TELE BROADBENT, GEORGE P NAME 201 NORTH ILLINOIS STREET, 23RD FLOOR STREET ADDRESS C81Y-S1-71P INDIANAPOLIS, IN 46204 TITLE BRADLEY, JOYCE A 201 NORTH ILLINOIS STREET, 23RD FLOOR STREET ADDRESS

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119, 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 it 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 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered. GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR