FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 11, 2002 8:00 am Secretary of State F01000003332 DOCUMENT # 1. Entity Name 07-11-2002 90244 046 ***150 00 FRONTIER FINANCIAL CORP. Principal Place of Business Mailing Address 3045 E. HENRIETTA RD. 3045 E. HENRIETTA RD. HENRIETTA NY 14467 HENRIETTA NY 14467 _Mailing Address 2. Principal Place of Business 30 PO Box DO NOT WRITE IN THIS SPACE Suite Apt. #, etc Suite, Apt. #, etc. HENRIETTA 4. FEI Number Applied For City & State 16-1514142 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. TITLE Change **CPST** Delete TITLE NAME SQUIRES, MARK NAME 3045 E. HENRIETTA RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HENRIETTA NY 14467 CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP .CITY-ST-ZIP _ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 trusted empowered to execute his 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 appress, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR FINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

7/5/0a

585-321-1500

Daytime Phone #

☐ Change

☐ Addition

CR2E034 (4/02)

all Extensest F01000003332

Frontier Financial Corp. Registered Mortgage Broker-NYS / FL Banking Dept. 3045 E. Henrietta Rd. Henrietta, NY 14467 585-321-1500 Fax 585-723-5589

Florida Department of State

Division of Corporations

From: Mark Squires

7/5/2002

Uniform Business Report Re:

> प्रस्कारक का जा । विवस्तिक सुनुष्टा CHEROLOGIC ONLY TOUR DAYS . I

To Whom it May Concern,

I received the UBR documentation packet 7/3/02. I called the FL Division of Corporations on 7/3/02 to explain that the building Landlord thought my original January packet was junk mail and said he may have tossed it. The Div of Corp representative I spoke to, said to mail a check for \$150 along with this Letter Of Explanation and we would be set. Please note that I have changed my mailing address to avoid this situation in the future.

Your understanding in this matter is appreciated.

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