2004 FOR PROFIT CORPORATION

ANNUAL REPORT



FILED

Feb 05, 2004 8:00 am Secretary of State

02-05-2004 90013 015 ***150 00 **DOCUMENT # F02000003325** 1. Entity Name AHI PROPERTIES I, INC. Principal Place of Business Mailing Address 94010285 1400 MARSH LANDING PKWY., STE. 112 1400 MARSH LANDING PKWY., STE. 112 JACKSONVILLE, FL 32250 JACKSONVILLE, FL 32250 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062004 Chg-P CR2E034 (10/03) City & State 4 EEL Number Applied For City & State 01-0718252 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \Box Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS ₃10. 11. PCOD Change **₩** Addition TITLE Delete TITLE GLENN SPILLER, JONATHAN M. NAME HEIAR. PKWY #112 NAME 1400 MARSH LANDING 1400 MARSH LANDING PKWY., STE 112 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP JACKSONVILLE, FL 32250 V/AS ☐ Delete ☐ Change ☐ Addition TITLE TITLE SCHILLER, ROBERT R BARATELLI PHIL NAME NAME 1400 MARSH CANDING PKW4 #112 STREET ADDRESS 1400 MARSH LANDING PKWY., STE. 112 STREET ADDRESS CITY:ST:7IP JACKSONVILLE, FL 32250 CITY-ST-ZiP 32250 JACKSONUILLE TITLE Delete TITLE ☐ Addition SMITH, TODD NAME PARICW SY 1400 MARSH LANDING PKWY., STE. 112 STREET ADDRESS 1400 MARSH STREET ADDRESS JACKSONVILLE, FL 32250 CITY-ST-ZIP CITY-ST-ZIP JACKSOnville 亿. TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ Delete

TITLE NAME

STREET ADDRESS

CITY - ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TODD S. SMITH

SECIZETARY

Change

☐ Addition