Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H030000978673)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

SUZANNE M. McLAUGHLIN

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626

Phone : (407)650-1000

Fax Number : (407)650-1065

FOREIGN PROFIT QUALIFICATION

CNL Retirement SU TRS Corp.

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

H03000097867 3

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANC REGISTER A FO	CE WITH SECTION 607.1503, FLORID DREIGN CORPORATION TO TRANSA	MS. CTI	TATUTES, THE FOLLOWING IS SUBMITTED, TO E BUSINESS IN THE STATE OF FLORIDA.	10 M
1. CNL Retir	ement SU TRS Corp.		The second secon	
words or abbre	oration; must include the word "INCORPOR viations of like import in language as will cl or parmership if not so contained in the nam	early	ED", "COMPANY", "CORPORATION" or rindicate that it is a corporation instead of a present.)	ALL CONCRETE
2. Delaware		3.	Applied for	12/20
(State or country	y under the law of which it is incorporated)		(FEI number, if applicable)	76.0x
403/27/20	003	5.	Perpetual	70
(Dai	te of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	-
6. Upon qua	alification			
(Date first trans:	acted business in Florida. If corporation has (SEE SECTIONS 607.1	not 501,	transacted business in Florida, insert "upon qualification.") 607.1502 and 817.155, F.S.)	ī
7. 450 S. O	range Avenue, Orlando FL 32801	1	_	
	(Principal office	addr	ess)	
PO Box 4	1920, Orlando FL 32802-4920	^		. -
	(Current mailing	addr	tss)	-
8. Investment				
(Purpose)	(s) of corporation authorized in home state of	T CO	muy to be carried out in state of Florida)	•
9. Name and str	reet address of Florida registered age	ut: :	(P.O. Box or Mail Drop Box NOT acceptable)	
Name:	Linda A. Scarcelli			- · · · · · · · ·
Office Address:	450 S. Orange Avenue			<u>.</u>
-	Orlando		32801	
	(City)		, Florida(Zip code)	
	. ,,		(22, 33-1)	
Having been nan designated in thi further agree to c	s application, I hereby accept the appoi	intm es ri	ce of process for the above stated corporation at the ent as registered agent and agree to act in this capa dative to the proper and complete performance of m my position as registered agent	city. I
	Tynel (Registered agent)	مر	eke	÷

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

H03000097867 3

12.	Names and	business	addresses o	of officers	and/or director	3:
-----	-----------	----------	-------------	-------------	-----------------	----

A. DIRE	CTORS			
Chairman:	James M. Seneff, Jr.			- Ega
	450 S.Orange Avenue, Orlando FL 32801			100
				マクン
– Vice Chair	108B:			30,Cg, 1
Address:				5000
		· · · · · · · · · · · · · · · · · · ·		- OR
Director:	Robert A. Bourne		-	
	450 S. Orange Avenue, Orlando FL 32801			_
_		-		
Director:	Thomas J. Hutchison, III			
	450 S. Orange Avenue, Orlando FL 32801			
B. OFFI	CERS			
resident;	SEE ATTACHED	·		
ddress:				
	,			
- lice Presid	ieni;			
ddress:	·		_	
ocretary:	·			
\ddress:				
reasurer:				
\ddress: _				
			<u></u>	
NOTE: 1	f necessary, you may attach an addendum to the application	n listing additional	officers and/or dire	ctors.
3.	Tynd Cal Scarces			
1:-	(Signature of Chairman, Vice Chairman, or any offi	cer listed in numbe	r 12 of the applicati	on)
a. Lin	ida A. Scarcelli, Assistant Secretary			

(Typed or printed name and capacity of person signing application)

E03000097867 3

* 03/31/2003

CNL Retirement SU TRS Corp.

CNL Retirement SU TRS Corp.

CNL Retirement SU TRS Corp.				
CNL, Retirement SU TRS Corp.				
Name	- <u>Title</u>	Business Cy Co		
Phillip M. Anderson	Executive Vice President	450 S. Orange Avenue Orlando, FL 32801		
Stuart J. Beebe	Executive Vice President	450 S. Orange Avenue Orlando, FL 32801		
Robert A. Bourne	Treasurer	450 S. Orange Avenue Orlando, FL 32801		
Thomas J. Hutchison, III	President	450 S. Orange Avenue Orlando, FL 32801		
Lynn E. Rose	Secretary	450 S. Orange Avenue Orlando, FL 32801		
Bradley B. Rush	Senior Vice President	450 S. Orange Avenue Orlando, FL 32801		
Linda A. Scarcelli	Assistant Secretary	450 S. Orange Avenue Orlando, FL 32801		
James M. Seneff, Jr.	Chairman	450 S. Orange Avenue Orlando, FL 32801		
	Chief Executive Officer	***		

PAGE 1

H03000097867 3

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RETIREMENT SU TRS CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF MARCH, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



3640965

030204024

SBOO

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 2333984

DATE: 03-27-03