

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.

(((H07000198301 3)))



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)205-0381

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 : (407)650-1000 Phone Fax Number : (407)540-2699

FOREIGN PROFIT/NONPROFIT CORPORATION

CNL Income Sunday River TRS Corp.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$78.75 |

Electronic Filing Menu

Corporate Filing Menu

Help

H07000198301 3

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| (If name unavai | • | e adopted for the purpose of transacting business in Florida) 26-0582726 | |
|-------------------------|--|--|---------------------|
| | under the law of which it is incorporated) | (FEI number, if applicable) | |
| ⊿ July 16, 2 | • | perpetual | |
| | e of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") | |
| _{6.} upon qua | lification | | |
| o | (Date first transacted business i | in Florida, if prior to registration) 502, F.S., to determine penalty liability) | 07 AUG -7 PH 12: 57 |
| _{7.} 450 S. Or | ange Avenue, Orlando, FL 32 | 2801 <u>E</u> S | in the second |
| | (Principal office add | hess) | <u>'</u> ' |
| PO Box 4 | 920, Orlando, FL 32802 | Signal Control of the | -0 |
| | (Current mailing add | iress) | , <u>F</u> |
| s lessor of p | personal property | | 57 |
| | s) of corporation authorized in home state or co | ountry to be carried out in state of Florida) | , |
| 9. Name and stre | et address of Florida registered agent: (P.C | D. Box NOT acceptable) | • |
| Name: | Linda A. Scarcelli | | |
| Office Address: | 450 S. Orange Ave., | <u> </u> | |
| | Orlanda | , Florida 32801 | |
| | Orlando | | |

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.

FILED 07 AUG -7 PM 12: 57

| | UT HOU | H07000198301 3 |
|---|--|---------------------------------------|
| 12. Names and business addresses of officers and/or directors: | SECRETARY OF STATE TALLAHASSEE, FLORIDA | |
| A. DIRECTORS | TALLAPANOCE | |
| Chairman: please see attached. | | |
| Address: | | |
| Vice Chairman: | | |
| Address: | | |
| Director: | | |
| Address: | | |
| Director: | • | |
| Address: | • | • |
| B. OFFICERS President: please see attached | | |
| Address: | | |
| | | · · · · · · · · · · · · · · · · · · · |
| Vice President: | | · · · · · · · · · · · · · · · · · · · |
| | | |
| Secretary: | | |
| Address: | | |
| Address: | | , |
| NOTE: If necessary, you may attach an addendum to the application | cation listing additional officers a | nd/or directors. |
| 13. (Signature of Director or Officer listed in | number 12 of the application) | |
| Linda A. Scarcelli, Asst. Secretary | | |
| (Typed or printed name and capacity of | f person signing application) | |

H07000198301 3

CNL Income Sunday River TRS Corp.

| Director/Manager | Title | Address |
|---------------------------|----------------------|--|
| Raymon Byron Carlock, Jr. | Director | 450 S. Orange Ave., Orlando, FL 32801 |
| Charles A. Muller | Director | 450 S. Orange Ave., Orlando, FL 32801 |
| Tammie A. Quinlan | Director | 450 S. Orange Avc., Orlando, FL 32801 |
| John L. Fridlington | Independent Director | 445 Broad Hollow Rd., Suite 239, Melville, NY 11747 |
| David V. DeAngelis | Independent Director | 445 Broad Hollow Rd., Suite 239, Melville, NY 11747 |

| Officer | Title | Address |
|---------------------------|--------------------------|---------------------------------------|
| Raymon Byron Carlock, Jr. | President | 450 S. Orange Ave., Otlando, FL 32801 |
| Robert A. Bourne | Treasurer | 450 S. Orange Ave., Orlando, FL 32801 |
| Charles A. Muller | Executive Vice President | 450 S. Orange Ave., Orlando, FL 32801 |
| Tammie A. Quinlan | Executive Vice President | 450 S. Orange Ave., Orlando, FL 32801 |
| | Secretary | 450 S. Orange Ave., Orlando, FL 32801 |
| Amy Sinelli | Senior Vice President | 450 S. Orange Ave., Orlando, FL 32801 |
| Joseph T. Johnson | Senior Vice President | 450 S. Orange Ave., Orlando, FL 32801 |
| Linda A. Scarcelli | Assistant Secretary | 450 S. Orange Ave., Orlando, FL 32801 |



Ø 005

07 AUG -7 PM 12: 57

H07000198301 3



PAGE T

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL INCOME SUNDAY RIVER TRE 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 SIXTEENTH DAY OF JULY, A.D. 2007.

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

4389203 8300 070815796



Warriet Smith Hindan

MBMINI SMILLI WINDSDI, SECTEDBY OF ST

AUTRENTICATION: 5843678

DATE: 07-16-07