2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F13111 May 08, 2000 8:00 am 1. Entity Name Secretary of State CMC DEVELOPMENT CORPORATION 05-08-2000 90201 032 ***150.00 Principal Place of Business Mailing Address 3003 NORTH TAMIAMI TRAIL 3003 NORTH TAMIAMI TRAIL **STE 400** STE 400 NAPLES FL 34103-2714 NAPLES FL 34103 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2056200 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FLORA, TERRY L Street Address (P.O. Box Number is Not Acceptable) 3003 TAMIAMI TRAIL N. Suite 400 NAPLES FL 34103 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. 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 \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11. ☐ Addition XX Delete TITLE TITLE COLLIER, MILES C NAME NAME STREET ADDRESS STREET ADDRESS 3003 TAMIAMI TR N. STE 400 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 PD XX Change Addition Delete TITI F TITLE NAME Flood, Thomas J. FLOOD, THOMAS J NAME STREET ADDRESS 3003 Tamiami Trail N., Ste 400 STREET ADDRESS 3003 TAMIAMI TR N. STE 400 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 Naples, FL 34103 Addition **VSD** ☐ Delete TITLE TITLE NAME FLORA, TERRY L STREET ADDRESS STREET ADDRESS 3003 TAMIAMI TR N. STE 400 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 ☐ Addition ☐ Delete TITLE TITLE Birr. Jeffrev M. NAME BIRR. JEFFREY M. NAME 3003 Tamiami Trail N. Ste 400 STREET ADDRESS STREET ADDRESS 3003 TAMIAMI TR N. STE 400 CITY-ST-ZIP Naples, FL 34103 CITY-ST-ZIP NAPLES FL 34103 XX Change Addition ☐ Delete TITLE TITLE OCONNOR, JOHN D O'Connor, John D. NAME STREET ADDRESS STREET ADDRESS 3003 TAMIAMI TR N. STE 400 3003 Tamiami Trail North, Ste 400 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 Naples, FL_34103 ☐ Change Addition AT ☐ Delete TITLE CORINA, ROBERT D NAME 3003 TAMIAMI TR N. STE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPLES FL 34103

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 trustee empowered to execute this 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 address, with all other like empowered.