2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F54167 Mar 10, 2000 8:00 am 1. Entity Name URBAN APPROACH, INC. **Secretary of State** 03-10-2000 90011 029 ***150.00 Mailing Address Principal Place of Business 200 PASADENA PLACE 200 PASADENA PLACE ORLANDO FL 32803 ORLANDO FL 32803-3828 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2144643 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 BRANDON, STEPHEN E Street Address (P.O. Box Number is Not Acceptable) 200 PASADENA PLACE ORLANDO FL 32803 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 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 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. [] Change ☐ Addition ☐ Delete TITLE TITLE BRANDON, JEFFREY L NAME NAME STREET ADDRESS 5761 BIRD RD STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP VST Addition ☐ Delete Change TITLE BRANDON, STEPHEN E NAME 200 PASADENA PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32803 CITY-ST-ZIP Change Addition TITLE ☐ Delete BRANDON, EDWARD W NAME 200 PASADENA PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32803 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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-ZIP CITY-ST-7IP ☐ 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 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.

SIGNATURE:

ructon 2/28/00

407-835-9000

Daytime Phone #