2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am Secretary of State DOCUMENT # F9400000644 05-16-2001 90003 015 ***150.00 FSM ORLANDO MANAGEMENT, INC. Principal Place of Business Mailing Address 3600 SOUTH YOSEMITE 3600 SOUTH YOSEMITE 549336 10TH FLOOR 10TH FLOOR DENVER CO 80237 DENVER CO 80237 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 84-1258488 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 11. 12. PTD Addition TITLE ☐ Delete MILLER, ANDREW S NAME NAME STREET ADDRESS 3600 S. YOSEMITE, 10TH FLOOR STREET ADDRESS **DENVER CO** CITY-ST-ZIP CITY-ST-ZIP VSD ☐ Addition ☐ Delete ☐ Change TITLE TITLE SEVO, JOHN M NAME NAME 3600 S. YOSEMITE, 10TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DENVER CO CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE FEINER, MICHAEL NAME ~ NAME 3600 S. YOSEMITE, 10TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DENVER CO** CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TiTi F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete Addition TITLE ☐ Chanoe MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS 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 reserver 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 attachm

SIGNATURE:

CR2E034 (10/00)

FILED