FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000005513 (6)

1. Corporation Name
WM. PAGE & ASSOCIATES, INC.

Principal Place of Business
SUITE 300
2810 EAST OAKLAND PARK BOULEVARD
FORT LAUDERDALE FL 33306

Mailing Address
SUITE 300
2810 EAST OAKLAND PARK BOULEVARD
FORT LAUDERDALE FL 33306

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/24/1994
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt #, etc (22) / Suite, Apt. #, etc (27)
City & State (23) / City & State (28)
Zip (24) Country (25) / Zip (29) Country (30)

4. FEI Number: 34-1722615 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name: William S PAGE
82 Street Address (P.O. Box Number is Not Acceptable): 2810 E. OAKLAND PK Blvd. #300
83
84 City: FT. LAUDERDALE FL 85 Zip Code: 33306

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Wm. Scott Page President 4-19-95
(Signature of a New Registered Agent) (Name of Registered Agent — Typed or Printed) (Date)

12. OFFICERS AND DIRECTORS

TITLE	PVST
NAME	PAGE, WILLIAM S
STREET ADDRESS	2810 EAST OAKLAND PARK BLVD., SUITE 300
CITY - ST - ZIP	FORT LAUDERDALE FL 33324
TITLE	C
NAME	PAGE, WILLIAM S
STREET ADDRESS	2810 EAST OAKLAND PARK BLVD., SUITE 300
CITY - ST - ZIP	FORT LAUDERDALE FL 33324
TITLE	VC
NAME	DOWNING, TIMOTHY J
STREET ADDRESS	1300 EAST NINTH STREET, SUITE 900
CITY - ST - ZIP	CLEVELAND OH 44114-1583
TITLE	D
NAME	ANDERSON, LARS-PETER
STREET ADDRESS	5311 NORTHFIELD ROAD, #200
CITY - ST - ZIP	BEDFORD HEIGHTS OH 44146
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P/S/T	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	D	☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 of Section 12, or gave attachment with an address.

SIGNATURE: Wm. Scott Page
(SIGNATURE AND NAME OF PRINTED NAME OF BLANKO OFFICER OR DIRECTOR)

4-19-95 (Date) 325.56 P. 8.58 (Filing Fee)

0213270 CP