2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 18, 2001 08:00 AM DOCUMENT # F9500001141 Entity Name **Secretary of State** SM-PINNACLE PLAZA, INC. Principal Place of Business Mailing Address 9021 TOWN CENTER PKWY 9021 TOWN CENTER PKWY BRADENTON FL BRADENTON FL34202 34202 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 52-1880030 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRAUS KIMBERLY L 9021 TOWN CENTER PKWY Street Address (P.O. Box Number is Not Acceptable) BRADENTON FL34202 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 04/18/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 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 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VD TITLE CR2E034 (11/00) ☐ Delete TITLE ☐ Addition X Change EDMONSON MAME LOU NAME EDMONDSON LOUIS 9021 TOWN CENTER PARKWAY STREET ADDRESS STREET ADDRESS 9021 TOWN CENTER PARKWAY CITY-ST-ZIP BRADENTON FL 34202 CITY-ST-ZIP BRADENTON 34202 AS ☐ Delete TITLE ☐ Change NAME GRAUS KIMBERLY L NAME STREET ADDRESS 9021 TOWN CENTER PKWY STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34202 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition DOYLE MICHAEL NAME STREET ADDRESS 9021 TOWN CENTER PKWY STREET ADDRESS CITY-ST-ZIP BRADENTON 34202 CITY-ST-ZIP ☐ Delete TITLE **X** Change Addition NEWTON JOHN NAME NEWSOME MHOL STREET ADDRESS 9021 TOWN CENTER PKWY STREET ADDRESS 9021 TOWN CENTER PKWY CITY-ST-ZIP BRADENTON CITY-ST-ZIP BRADENTON \mathbf{FL} TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

04/18/2001

Date

Daytime Phone #

KIMBERLY L. GRAUS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _