

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 07, 2000 08:00 AM****Secretary of State****DOCUMENT # F95000005661**

1. Entity Name

NET LEASE REALTY II, INC.

Principal Place of Business

400 EAST SOUTH STREET, SUITE 500

ORLANDO
32801

FL

Mailing Address

400 EAST SOUTH STREET, SUITE 500

ORLANDO
32801

FL

2. Principal Place of Business

450 S. ORANGE AVENUE

3. Mailing Address

450 S. ORANGE AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO

FL

City & State

ORLANDO

FL

4. FEI Number

59-3316230

Applied For

Not Applicable

Zip
32801

Country

Zip
32801

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION
33324
US

FL

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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)

03/07/2000

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
VCT	BOURNE ROBERT A	400 E SOUTH STREET SUITE 500	ORLANDO FL 32801	<input checked="" type="checkbox"/>
D	HINKLE CLIFFORD R	400 EAST SOUTH STREET, SUITE 500	ORLANDO FL 32801	<input type="checkbox"/>
D	COX WILLOUGHBY T	400 EAST SOUTH STREET, SUITE 500	ORLANDO FL 32801	<input type="checkbox"/>
PCOO	RALSTON GARY M	400 EST SOUTH STREET SUITE 500	ORLANDO FL 32801	<input type="checkbox"/>
EVAS	HABICHT KEVIN B	400 E SOUTH STREET SUITE 500	ORLANDO FL	<input type="checkbox"/>
DCCE	SENEFF JAMES MJR	400 E SOUTH STREET SUITE 500	ORLANDO FL	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	HINKLE CLIFFORD R	450 S. ORANGE AVENUE	ORLANDO FL 32801	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	LANIER TED B	V	ORLANDO FL 32801	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PCOO	RALSTON GARY M	450 S. ORANGE AVENUE	ORLANDO FL 32801	<input checked="" type="checkbox"/>	<input type="checkbox"/>
EVST	HABICHT KEVIN B	450 S. ORANGE AVENUE	ORLANDO FL 32801	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DCEO	SENEFF JAMES MJR	450 S. ORANGE AVENUE	ORLANDO FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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: GARY M. RALSTON

03/07/2000