2000 UNIFORM BUSINESS REPORT (UBR) **FILED** May 04, 2000 8:00 am Secretary of State DOCUMENT # **F97000006137 BOCA RESORTS, INC.** 05-04-2000 90130 043 ***150.00 Mailing Address Principal Place of Business 450 EAST LAS OLAS BOULEVARD 450 EAST LAS OLAS BOULEVARD **SUITE 1400 SUITE 1400** FORT LAUDERDALE FL 33301-4206 CODT LAUDERDALE FL 33301 2. Principal Place of Business 3. Mailing Address 501 E. Camino Real O. Box 5025 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. orporate Office Corporate Office 4. FEI Number Applied For City & State City & State 65-0676005 Not Applicable Boca Raton, FL Boca Raton, Country \$8.75 Additional Zip Zip 5. Certificate of Status Desired Fee Required 33432 33431 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HANDLEY, RICHARD L Street Address (P.O. Box Number is Not Acceptable) 450 EAST LAS OLAS BLVD FORT LAUDERDALE FL 33301 Zip Code City 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 DATE 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 Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees \Box (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. XX Change Addition **VS** TITLE Delete TITLE NAME HANDLEY, RICHARD L STREET ADDRESS STREET ADDRESS 450 EAST LAS OLAS BLVD 450 E. Las Olas Blvd., #1500 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL Addition X Change ☐ Delete TITLE TITLE NAME NAME DAURIA, STEVEN M 501 E. Camino Real Boca Raton, FL 33 STREET ADDRESS STREET ADDRESS 450 E. LAS OLAS BLVD. #1400 33432 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33301 ☐ Addition Change □ Delete TITLE NAME HUIZENGA, H W STREET ADDRESS 450 E. Las Olas Blvd. #1500 STREET ADDRESS 450 EAST LAS OLAS BLVD CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL Addition Change PD ☐ Delete TITLE TITLE NAME ROCHON, RICHARD C NAME STREET ADDRESS STREET ADDRESS 450 E. LAS OLAS BLVD., #1500 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33301 Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

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 regeiver 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:

SEEVEN ME DAURIA
BIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-00

561-447-5300

Daytime Phone #