2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 05, 2001 8:00 am Secretary of State DOCUMENT # F9700006449 1. Entity Name TCR NF PROPERTIES, INC. 05-05-2001 91095 046 ***150.00 Principal Place of Business Mailing Address 201 N NEW YORK AVE 201 N NEW YORK AVE 100000 SUITE 200 SHITE 200 WINTER PARK FL 32789 WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FFI Number 75-2723022 Not Applicable Zip Country **\$8.75** Additional Zip Country \Box 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition PD TITLE □ Delete TITLE HOEKSEMA, DOUGLAS A NAME NAME STREET ADDRESS 201 N NEW YORK AVE STE 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 Change □ Addition TITLE □ Delete TITLE NAME TERWILLIGER, J R NAME 2859 PACES FERRY ROAD SUITE 1400 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ATLANTA GA 30339 ☐ Change ☐ Addition VD TITLE □ Delete TITLE CROW, HARLAN R NAME NAME 2001 ROSS AVENUE SUITE 3200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75201 VST Change Addition TITLE ☐ Delete TITLE PATTERSON, THOMAS J NAME NAMÉ 717 N. HARWOOD #1200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX ☐ Addition Change AS ☐ Delete TITLE TITLE ZANOWICK, JOAN C NAME NAME 201 N NEW YORK AVE STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 Change ☐ Addition X Delete TITLE TITLE COLLINS, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 1810 GATEWAY DR STE 100 CITY-ST-ZIP CITY-ST-7IP SAN MATEO CA 94404

13. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C Zanowick 4/16/01

Daytime Phone #