FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Apr 06, 2001 8:00 am Secretary of State DOCUMENT # F9700006760 WINTER PROPERTIES, INC. 04-06-2001 90067 022 ***150.00 Principal Place of Business Mailing Address 1330 SPRING ST NW 1330 SPRING ST NW ATLANTA GA 30309-2810 ATLANTA GA 30309-2810 9 4 V 1 9 2. Principal Place of Business 1330 Spring Street, NW 3. Mailing Address 1330 Spring Street, NW Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-2262825 Atlanta, GA Atlanta, GA Not Applicable ^{Zip} 30309-2810 Country Country \$8.75 Additional 5. Certificate of Status Desired 30309-2810 Fee Required 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent WINTER CONSTRUCTION COMPANY Street Address (P.O. Box Number is Not Acceptable) 2907 BAY TO BAY BLVD., STE. 203 **TAMPA FL 33629** City 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) 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE ☐ Delete ☐ Addition SILVERMAN, ROBERT L NAME NAME 2022 RIVERMEADE WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30327 CITY-ST-ZIP DST Delete TITLE TITLE ☐ Addition DURKIN, SEAN NAME NAME 4470 MAY APPLE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ALPHARETTA GA 30302 D - ----TITLE Delete TITLE Change ~ [Addition ELLIS, GARY NAME NAME 4994 BERESFORD CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORCROSS GA 30092 CITY-ST-ZIP TITLE K Delete TITLE ☐ Change Addition LURIE, ROBERT M NAME NAME 517 HEYWARD CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARIETTA GA 30064 CITY-ST-7IP TITLE ☐ Delete ☐ Change TITLE Addition NAME WHITHEAD, BRANDI NAME 452 CLIFTON RD., #1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30307 CITY-ST-ZIP VPOD ☐ Delete TITLE Change Addition GRIMES, GRANT NAME NAME STREET ADDRESS 5498 MT. VERNON WAY STREET ADDRESS CITY-ST-ZIP **DUNWOODY GA 30338** 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