2002: UNIFORM BUSINESS REPORT (UBR)

May 23, 2002 8:00 am Secretary of State DOCUMENT # F98000003737 1. Entity Name 05-23-2002 90107 025 ***150 00 RIVERWALK COMMERCE ACQUISITION CORP. Principal Place of Business Mailing Address 4500 PGA BLVD 33 BLOOMFIELD HILLS PKWY, STE 200 #400 **BLOOMFIELD HILLS MI 48304** PALM BEACH GARDENS FL 33418 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 38-3419862 Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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, 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 elicible to satisfy its Intancible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE (9/01) ☐ Delete ☐ Addition ☐ Change NAME SMITH, HARMON D NAME STREET ADDRESS CR2E034 4500 PGA BLVD STE 400 STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS FL 33418 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME ROBINSON, BRUCE E STREET ADDRESS 33 BLOOMFIELD HILLS PKWY, STE 200 STREET ADDRESS CITY-ST-ZIP BLOOMFIELD HILLS MI 48304 CITY-ST-ZIP ☐ Delete D۷ TITLE Change Addition NAME HATHAWAY, CHARLES H STREET ADDRESS 4500 PGA BLVD STE 400 STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP PALM BEACH GARDENS FL 33418 X Delete TITLE DVS X Change DVS ☐ Addition WILLIAM, SHANNON E NAME WILLIAM, SHANNON E STREET ADDRESS STREET ADDRESS 4500 PGA BLV STE 302 4500 PGA BLV Ste 400 CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 TITLE ☐ Delete TITLE AS Change Addition NAME ZUKOFF, COLETTE R STREET ADDRESS STREET ADDRESS 33 BLOOMFIELD HILLS PKWY STE 200 CITY-ST-ZIP CITY-ST-ZIP **BLOOMFIELD MI 48304** ☐ Delete TITLE Change Addition NAME CREGG, ROGER A NAME STREET ADDRESS 33 BLOOMFIELD HILLS PKWY STE 200 STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPE OB PRINTED TAME OF BIGNING OFFICER OR DIRECTOR

BLOOMFIELD HILLS MI 48304

CITY-ST-ZIP

4/29/08

248-644-7300

Daytime Phone #

FILED