2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachme

SIGNATURE:

FILED DOCUMENT # **F98000005376** Feb 24, 2000 8:00 am **Secretary of State** WCC MERGER CORPORATION 02-24-2000 90006 004 ***150.00 Principal Place of Business Mailing Address PO BOX 2273 PO BOX 2273 ORLANDO FL 32802 ORLANDO FL 32802-2273 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite Apt. #, etc. Applied For City & State City & State 4. FEI Number 58-2409339 Not Applicable Zip Country Country \$8.75 Additional 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 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. 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 10. 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 Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11. ☐ Addition X Delete TITLE Change TITLE CAYE, CHARLES G JR NAME NAME STREET ADDRESS STREET ADDRESS 923 BROAD STREET CITY-ST-ZIP CITY-ST-ZIP **AUGUSTA GA 30901** President/Director X Change ☐ Addition ☐ Delete TITLE TITLE HALL, A. S JR NAME 20 N. Orange Ave., Suite 200 STREET ADDRESS STREET ADDRESS 923 BROAD STREET CITY-ST-ZIP Orlando, FL 32801 CITY-ST-7IP AUGUSTA GA 30901 TITLE ☐ Delete TITLE NAME. .. NAME ZEPF. J. S 20 N. Orange Ave., Suite 200 STREET ADDRESS 923 BROAD STREET STREET ADDRESS CITY-ST-ZIP Orlando, FL 32801 CITY-ST-ZIP AUGUSTA GA 30901 ☐ Addition TITLE Change Dele⁻e TITLE **BUTTERFIELD. BENJAMIN** NAME NAME STREET ADDRESS STREET ADDRESS 923 BROAD STREET 20 N. Orange Ave., Suite 200 Orlando, FL 32801 CITY-ST-ZIP CITY-ST-ZIP AUGUSTA GA 30901 K Change Addition **ASAT** Delete TITLE NAME CLARK, JAY NAME 20 N. Orange Ave., Suite 200 STREET ADDRESS STREET ADDRESS 923 BROAD STREET CITY-ST-ZIP Orlando, FL 32801 CITY-ST-ZIP AUGUSTA GA 30901 Addition ☐ Change ☐ Delete TITLE Director TITLE NAME NAME David H. Hughes STREET ADDRESS STREET ADDRESS 20 N. Orange Ave., Suite 200 Orlando, FL 32801 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 thustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

all other like empowered.

REQIA RStewart Hall, Jr.

407-841-4755