FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 10, 2002 8:00 am F98000006334 DOCUMENT # **Secretary of State** 1. Entity Name 02-10-2002 90056 023 ***150.00 IVANHOE FINANCIAL, INC. Principal Place of Business Mailing Address 604 COURTLAND ST., STE.320 604 COURTLAND ST., STE.320 ORLANDO FL 32804 ORLANDO FL 32804 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FE! Number 52-2134140 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS (9/01)TITLE □ Delete TITLE ☐ Change Addition REICH, PAUL F NAME NAME CR2E034 STREET ADDRESS 604 COURTLAND ST., STE.320 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804 TITLE X Delete TITLE Change X Addition Beck, John Wm. NAME FIELDS, RANDOLPH H NAME STREET ADDRESS STREET ADDRESS 111 NORTH ORANGE AVE., 20TH FL PO Box 626 CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32801 Winter Park, FL 32790-0626 Change — Addition -TITLE n Delete TITLE NAME NAME FOREMAN, STEPHEN F STREET ADDRESS STREET ADDRESS 305 DOUGLAS AVENUE CITY-ST-ZIF CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 DS X Change TITLE ☐ Delete TITLE ☐ Addition Lovvorn, Robert E NAME LOWORN, ROBERT E NAME STREET ADDRESS 1720 Ivanhoe Blvd. STREET ADDRESS 1720 IVANHOE BLVD. CITY-ST-ZIP ORLANDO FL 32804 CITY-ST-ZIP Orlando, FL 32804 TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME SAUER, EDWARD NAME STREET ADDRESS 604 COURTLAND ST., STE. 320 STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32804 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STINE, ROBERT NAME STREET ADDRESS 2699 LEE ROAD, STE. 200 STREET ADDRESS WINTER PARK FL 32789 CITY-ST-ZIP 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 of 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 appears, with attachment with an appears.

SIGNATURE:

100 ريا ليا SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR
PAUL F. Reich Prosident 1/22/02

(407) 599-0900

Daytime Phone #