TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 3392+ Hollywood, Florida 33021 **XX**Change ☐ Addition ☐ Delete TITLE **EVPS** TITLE STOTZER. THEODORE R NAME 300 Hollywood Way STREET ADDRESS STREET ADDRESS 200 SOUTH PARK ROAD CITY-ST-ZIP Hollywood, Florida 33021 CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Addition **K** KChange Delete TITLE TITLE EVP ATZMON, SIDNEY NAME NAME 300 Hollywood Way STREET ADDRESS STREET ADDRESS 200 SOUTH PARK ROAD #200 Hollywood, Florida 33021 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33024 Addition **EVP** ☐ Defete TITLE Change TITLE NAME NAME DILL, BRETT 300 Hollywood Way STREET ADDRESS STREET ADDRESS 200 SOUTH PARK ROAD #200 33021 CITY-ST-ZIP Hollywood, Florida CITY-ST-ZIP HOLLYWOOD FL 33021 XX Change Addition TITLE ☐ Delete **EVP** TITLE LEBLANC, ROGER NAME STREET ADDRESS 300 Hollywood Way STREET ADDRESS 200 SOUTH PARK ROAD

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.

CITY-ST-ZIP

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOLLYWOOD FL 33021

CITY-ST-ZIP

954-981-1000 Théodore R. Stotzer, Exec. VP 4/25/00

Hollywood, Florida

33021