2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an at

SIGNATURE:

Feb 28, 2002 8:00 am Secretary of State F99000000223 DOCUMENT # 1. Entity Name 02-28-2002 90004 033 ***150.00 STUDENT DEVELOPERS I, INC. Mailing Address Principal Place of Business 6363 WOODWAY SUITE 1000 6363 WOODWAY SUITE 1000 HOUSTON TX 77057-1757 HOUSTON TX 77057-1757 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 76-0560749 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. ☐ Addition ☐ Change TITLE Delete TITLE NAME DINERSTEIN, T.H. NAME 6363 WOODWAY SUITE 1000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP HOUSTON TX 77057-1757 ☐ Addition Change ☐ Delete TITLE CEOD DINERSTEIN, JACK NAME STREET ADDRESS STREET ADDRESS 6363 WOODWAY SUITE 1000 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77057-1757 ☐ Addition [] Change ☐ Delete TITLE TITLE SD NAME NAME CALTAGIRONE, VINCENT T III STREET ADDRESS STREET ADDRESS 6363 WOODWAY SUITE 1000 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77057-1757 Change ☐ Addition TITI F ☐ Delete TITLE **CFOT** NAME HUSMANN, RANDALL NAME STREET ADDRESS STREET ADDRESS 6363 WOODWAY SUITE 1000 CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77057-1757 Change ☐ Addition TITLE ☐ Delete TITLE NASAE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS 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 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

FILED