2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 23, 2001 08:00 AM F99000006731 DOCUMENT # 1. Entity Name **Secretary of State** ANC FINANCIAL CORPORATION Principal Place of Business Mailing Address 200 SOUTH ANDREWS AVENUE 200 SOUTH ANDREWS AVENUE FORT LAUDERDALE FL FORT LAUDERDALE FL 33301 33301 2. Principal Place of Business 3. Mailing Address 200 SOUTH ANDREWS AVENUE, 11TH FLOOR 200 SOUTH ANDREWS AVENUE, 11TH FLOOR Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For FORT LAUDERDALE FL FORT LAUDERDALE 52-2207163 Not Applicable Zio Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL33324 US 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 01/23/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Addition CR2E034 (11/00) ☐ Change MAME NAME HYLE KATHLEEN W STREET ADDRESS STREET ADDRESS 200 SOUTH ANDREWS AVENUE CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE ☐ Delete TITLE ☐ Change NAME WILSON LELAND NAME STREET ADDRESS 200 SOUTH ANDREWS AVENUE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33301 CITY-ST-ZIP Delete TITLE X Change ☐ Addition SCHWARTZ HOWARD SCHWARTZ HOWARD NAME STREET ADDRESS 200 SOUTH ANDREWS AVENUE STREET ADDRESS 200 SOUTH ANDREWS AVENUE CITY-ST-ZIP FORT LAUDERDALE 33301 FLCITY-ST-ZIP FORT LAUDERDALE 33301 FL. ☐ Delete TITLE Change ☐ Addition BEARD KAREN NAME STREET ADDRESS 200 SOUTH ANDREWS AVENUE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE 33301 CITY-ST-ZIP TITLE DAS ☐ Delete TITLE ☐ Change ☐ Addition SIMPSON JEFFREY K NAME STREET ADDRESS 1201 MARKET ST., STE. 1700 CHASE MANHATTAN STREET ADDRESS CITY-ST-ZIP WILMINGTON DE 19801 CITY-ST-ZIP CAS ☐ Delete TITLE ☐ Addition STEWART GORDON NAME STEWART STREET ADDRESS 1201 MARKET ST., STE. 1700 CHASE MANHATTAN STREET ADDRESS 1201 MARKET ST., STE. 1700 CHASE MANHATTAN CITY-ST-ZIP WILMINGTON DE 19801 CITY-ST-ZIP WILMINGTON 19801 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.

01/23/2001

Date

Daytime Phone #

Howard D. Schwartz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _

O. MASON HURST, II, DIRECTOR 200 S. ANDREWS AVE.

FT. LAUDERDALE, FL 33301