2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # G21892 May 20, 2000 8:00 am 1. Entity Name Secretary of State GROSS COMMUNICATIONS CORPORATION 05-20-2000 90008 040 ***150.00 Principal Place of Business Mailing Address 170 W. FAIRBANKS AVE. 170 W. FAIRBANKS AVE. SUITE #200 SUITE #200 WINTER PARK FL 32789 WINTER PARK FL 32789-4360 **DOCOCOU** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 36-2429823 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GROSS, JOHN B. Street Address (P.O. Box Number is Not Acceptable) 170 W. FAIRBANKS AVE. WINTER PARK FL 32789 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition TITLE ☐ Delete ☐ Chance GROSS, HERBERT P NAME NAME 2046 N COUNTRYSIDE CR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 00000 Addition TITLE Change ☐ Delete TITLE GROSS, MARGARET K. NAME NAME STREET ADDRESS 2046 N COUNTRYSIDE CR STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORLANDO FL Change ☐ Addition ☐ Delete TITLE Gross John B. GROSS, JOHN B. NAME NAME Dais Via Salerno-Winterfark, FL 32789 1605 HIGHLAND RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER PARK FL CITY-ST-7IP Change Change ☐ Addition ☐ Delete TITLE GROSS, JAMES M. NAME NAME STREET ADDRESS 924 VERSAILLES CIR STREET ADDRESS Mai +land, FL32751 CITY-ST-ZIP MAITLAND FL CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change ☐ Delete NAME STREET ADDRESS STREET ADDRESS

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 tustee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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.407-647-5357

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