FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90030 042 ***150.00

DOCUMENT # G25263 1. Corporation Name EAST PARK REALTY, INC. Mailing Address Principal Place of Business POST OFFICE BOX 5369 3300 PHILLIPS HIGHWAY JACKSONVILLE FL 32247-5369 JACKSONVILLE FL 32207 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/23/1983 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-2298934 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Zip Country This corporation owes the current year Intangible Zip Country □ No ☐ Yes Personal Property Tax. 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MCGEHEE, THOMAS R. Street Address (P.O. Box Number is Not Acceptable) 3300 PHILLIPS HWY JACKSONVILLE FL 32207 83 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition ☐ Change DELETE 1.1 TITLE TITLE MCGEHEE, FRANK S. 1.2 NAME NAME 3300 PHILLIPS HWY 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE TITLE CPD 2.1 TITLE MCGEHEE, THOMAS R. 2.2 NAME NAME STREET ADDRESS 3300 PHILLIPS HWY 2.3 STREET ADDRESS JACKSONVILLE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 3.1 TITLE TITLE TAS ROGERS, JONATHAN Y 3.2 NAME NAME 3300 PHILIPS HWY 3.3 STREET ADDRESS STREET ADDRESS Jacksonville fl 34 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE CF₀ TITLE 4. 2 NAME NAME Brent, John STREET ADDRESS 3300 PHILIPS HWY 4.3 STREET ADDRESS JACKSONVILLE FL 4.4 CiTY-ST-ZiP CITY-ST-ZIP Addition ☐ Change DELETE 5.1 TITLE 5.2 NAME MCGEHEE. TR JR NAME 5.3 STREET ADDRESS 3300 PHILLIPS HWY STREET ADDRESS 5.4 CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Change Addition 6.1 TITLE ☐ DELETE TITLE 62 NAME MCGEHEE, SUTTON NAME 6.3 STREET ADDRESS 3300 PHILLIPS HWY STREET ADDRESS

JACKSONVILLE FL CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or only attachment with an address, with all other like empowered.

6.4 CITY+ST-ZIP

SIGNATURE:

RESULTION McGeher

CR2E034 (11/98