FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 28, 2002 8:00 am Secretary of State DOCUMENT # G68189 1. Entity Name PLAZA DEL RIO CORP. 04-28-2002 90775 035 ***158 Principal Place of Business Mailing Address 2101 OREGON PIKE PO BOX 5200 SUITE 300 LANCASTER PA 17606-5200 LANCASTER PA 17601 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt: #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 59-2367272 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Ξź Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHAW, TIMOTHY S Street Address (P.O. Box Number is Not Acceptable) 720 S. ORANGE AVE. SARASOT FL 34236 City Zip Code FL 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 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, 2002 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE ☐ Addition ☐ Change NAME FISHER, HERBERT, JR. NAME 2101 OREGON PIKE, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LANCASTER PA 17601 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME Jordan, Dennis W NAME STREET ADDRESS 2101 OREGON PIKE SUITE 300 STREET ADDRESS CITY-ST-ZIP LANCASTER PA 17601 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME FISHER, J. HERBERT JR. STREET ADDRESS 2101 OREGON PIKE SUITE 300 STREET ADDRESS CITY-ST-ZIP LANCASTER PA 17601 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME 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

SIGNATURE:

changed, or on an attachment.

dress, with all other like empowered

REDJ. Herbert Fisher, Jr.

4/10/02

Date

717-519-5200

Daytime Phone #