FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 20, 2002 8:00 am Secretary of State DOCUMENT # H37736 1. Entity Name 05-20-2002 90259 045 ***150.00 TRAFALGAR FINANCIAL CORPORATION Mailing Address Principal Place of Business 8900 SW 107 AVE 8900 SW 107 AVE #305 #305 MIAMI FL 33176 **MIAMI FL 33176** US 2. Principal Place of Business C/o GE Capital Real Estate 3. Mailing Address c/o GE Capital Real Estate DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 292 Long Ridge Road 292 Long Ridge Road Applied For 4. FEI Number City & State City & State 59-2494425 Not Applicable Stamford, CT Stamford, CT \$8.75 Additional Country Country Zip Zip Certificate of Status Desired Fee Required USA 06927 USA 06927 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change Addition DP **▼** Delete TITLE TITLE Robert E. Pfeiffer NAME ROZA, FRANK NAME STREET ADDRESS 292 Long Ridge Road 8900 SW 107 AVE #305 STREET ADDRESS CITY-ST-ZIP Stamford, CT 06927 MIAMI FL 33176 CITY-ST-ZIP Addition Change TITLE. VPT PSD TITLE NAME nasmyth, Fernando A Jayne Day NAME STREET ADDRESS 292 long Ridge Road STREET ADDRESS 8900 SW 107 AVE #305 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33176 Stamford, CT 06927 ▼ Change ☐ Addition ☐ Delete TITLE TITLE William P. Moore NAME 292 Long Ridge Road STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Stamford, CT 06927 CITY-ST-ZIP Fil Change ▼ Addition ☐ Delete TITLE AS TITLE Marybeth Crone NAME NAME STREET ADDRESS 292 Long Ridge Road STREET ADDRESS CITY-ST-7IP Stamford, CT 06927 CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 appropriate the proposed of the corporation of the receiver or trustee empowered.

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Date

Date