## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 26, 2001 08:00 AM J26610 DOCUMENT # Entity Name **Secretary of State** ST. LUCIE WEST REALTY, INC. Principal Place of Business Mailing Address 1850 FOUNTAINVIEW BLVD 1850 FOUNTAINVIEW BLVD STE 201 STE 201 PT ST LUCIE FL PT ST LUCIE FL34986 34986 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0155399 Not Applicable Zip Country Zip 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 HEGENER 1850 FOUNTAINVIEW BLVD Street Address (P.O. Box Number is Not Acceptable) **STE 201** PORT ST LUCIE FL34986 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 04/26/2001 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 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DC: TITLE CR2E034 (11/00) ☐ Delete TITLE ☐ Addition JOHN E MAME ARDO NAME 1350 NE 56TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33334 CITY-ST-ZIP D ☐ Delete TITLE ☐ Change NAME LEVAN ALAN NAME STREET ADDRESS 1750 E SUNRISE BLVD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33304 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition PAGE DAVID NAME STREET ADDRESS 1850 FOUNTAINVIEW BLVD-STE 201 STREET ADDRESS CITY-ST-ZIP PORT ST LUCIE 34986 CITY-ST-ZIP ☐ Delete Сhапде TITLE Addition HEGENER NAME STREET ADDRESS 1850 FOUNTAINVIEW BLVD-STE 201 STREET ADDRESS CITY-ST-ZIP PORT ST. LUCIE 34986 CITY-ST-ZIP TITLE DS Delete TITLE ☐ Change ☐ Addition GILBERT GLEN R NAME STREET ADDRESS 1750 E SUNRISE BLVD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE 33304 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition ANDERSON JAMES H NAME ANDERSON STREET ADDRESS 1850 FOUNTAINVIEW BLVD-STE 201 STREET ADDRESS 1850 FOUNTAINVIEW BLVD-STE 201 CITY-ST-ZIP PORT ST LUCIE 34996 CITY-ST-ZIP PORT ST LUCIE 34986 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. SIGNATURE: \_ Paul-J. Hegener 04/26/2001 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date