## 2003 FOR PROFIT CORPORATION

## Apr 28, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR J43500 DOCUMENT # 1. Entity Name 04-28-2003 90126 038 \*\*\*150.00 EAST PARK, INC. Mailing Address Principal Place of Business 3300 PHILLIPS HIGHWAY 3300 PHILLIPS HIGHWAY POST OFFICE BOX 5369 POST OFFICE BOX 5369 JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-2746517 Not Applicable Country \$8.75 Additional Zip 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 MIC Genee -- MCGEHEE, THOMAS R. Street Address (P.O. Box Number is Not Acceptable 3300 PHILLIPS HWY JACKSONVILLE FL-32207 Zip Code **3**ヱヱo7 Jacksonvil mits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity; the obligations of regist n Mc Gehee SIGNATURE: (NOTE: Registered Agent signature required Signature, typed or printed name . 11 EILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be \*After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. **OFFICERS AND DIRECTORS** 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ☐ Addition Delete TITLE MCGEHEE, THOMAS R. JR. NAME NAME 3300 PHILLIPS HWY STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP CITY-ST-7IP Presiden + Change ☐ Addition ☐ Delete TITLE TITLE NAME MCGEHEE, SUTTON NAME STREET ADDRESS 3300 PHILLIPS HWY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL ☐ Change ☐ Addition TITLE Delete TITLE PCD NAME NAME <del>MCGEHEE, THOMAS-R</del>.: STREET ADDRESS STREET ADDRESS 3300 PHILLIPS HWY CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME MCGEHEE, DAVID S. STREET ADDRESS STREET ADDRESS 3300 PHILLIPS HWY CITY-ST-7IP CITY-ST-ZIP JACKSONVILLE FL Change ☐ Addition TITLE TAS ☐ Detete NAME ROGERS, JONATHAN Y STREET ADDRESS STREET ADDRESS 3300 PHILIPS HWY CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL ☐ Change Addition ASD ☐ Delete TITLE NAME NAME MC GEHEE, FRANK S. STREET ADDRESS STREET ADDRESS 3300 PHILLIPS HWY CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL

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 receipt or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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of the corporation or the receichanged, or on an attachmen

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