2001 UNIFORM BUSINESS REPORT (UBR) Apr 05, 2001 8:00 am Secretary of State **DOCUMENT # J49729** 1. Entity Name REAL ESTATE RESEARCH CONSULTANTS, INC. 04-05-2001 90019 031 ***150.00 Principal Place of Business Mailing Address 200 E. ROBINSON ST. 200 E. ROBINSON ST. **STE 400** STE 400 ORLANDO FL 32801-4303 ORLANDO FL 32801-4303 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number 59-2762682 City & State Not Applicable \$8.75 Additional Zip Country 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 Name TATICH-PHILIP-Street Address (P.O. Box Number is Not Acceptable) 341 N MAITLAND AVE STE 340 MAITLAND FL 32751 Zip Code City 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 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 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 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 12. 11. XX Addition DVP ☐ Delete TITLE TITI F BEITSCH, OWEN M. NAME Darsey, David R. NAME 200 E ROBINSON ST STE 400 STREET ADDRESS STREET ADDRESS 200 E Robinson St. Ste. 400 ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP Orlando FL ☐ Addition PDT ☐ Delete ☐ Change TITLE TITLE OWEN. WILLIAM H. NAME NAME 200 E ROBINSON ST STE 400 STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DS ☐ Delete TITLE TITLE ROHR, JAY B. NAME NAME 200 E ROBINSON ST STE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP XX_{Delete} ☐ Addition Change TITLE TITLE ARNOLD, LEE E. NAME NAME 200 E ROBINSON ST STE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP ☐ Change Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE: William H. Owen, President

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

January 9, 2001 (407)843-