2001 UNIFORM BUSINESS REPORT (UBR)

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

Jan 29, 2001 8:00 am DOCUMENT # J58537 **Secretary of State** C. J. PROPERTIES, INC. 01-29-2001 90180 046 ***150.00 Principal Place of Business Mailing Address % JOHN R. SHIPE % JOHN R. SHIPE 401 W. DONEGAN AVE., STE. A 401 W. DONEGAN AVE., STE. A UUU11255 KISSIMMEE FL 34741 KISSIMMEE FL 34741 3. Mailing Address 1000 SHORE 2. Principal Place of Business DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2773646 KISSIMMEE Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHIPE, JOHN R .--Street Address (P.O. Box Number is Not Acceptable) 401 W DONEGAN AVE. SUITE A KISSIMMEE FL 34741 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (10/00) TITLE Delete TITLE ☐ Change ☐ Addition SHIPE, JOHN R. NAME NAME STREET ADDRESS 1000 SHORE DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34744 VĪD Delete Change ☐ Addition TITLE TITLE SHIPE, CECELIA NAME NAME STREET ADDRESS 1000 SHORE DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34744 ☐ Addition TITLE Delete TITLE ☐ Change ROGALSKI, SUZAN-C-S-NAME NAME STREET ADDRESS 4671 BRANDY OAK COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32257 TITLE Delete TITLE ☐ Change ☐ Addition SHIPE, PAUL E NAME NAME STREET ADDRESS 1000 SHORE DR STREET ADDRESS CITY-ST-ZIF KISSIMMEE FL 34744 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition 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

UNINGE PRES. JOHN R. SHIPE 1/19/01
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR