2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # K07556 May 09, 2000 8:00 am 1. Entity Name Secretary of State PEREGRINE PROPERTIES, INC. 05-09-2000 90110 044 ***150.00 Principal Place of Business Mailing Address 1031 W MOPRSE BLVD. #300 1031 W MOPRSE BLVD. #300 WINTER PARK FL 32789 WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2860680 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MOULTON, LESLEY Street Address (P.O. Box Number is Not Acceptable) 1031 W MORSE BLVD **STE 300** WINTER PARK FL 32789 Zip Code 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 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Delete TITLE Addition TITLE FOLKEN, DENNIS N. NAME NAME STREET ADDRESS STREET ADDRESS 1031 W. MORSE BLVD. #300 CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL ☐ Change ☐ Addition DVS ☐ Delete TITLE TITLE BARNES, JAMES T., JR NAME NAME STREET ADDRESS STREET ADDRESS 1031 W. MORSE BLVD. #300 CITY-ST-ZIP CITY-ST-7IP WINTER PARK FL ☐ Addition Change TITLE ☐ Delete TITLE MOULTON, LESLEY NAME NAME STREET ADDRESS 1031 W. MORSE BLVD. #300 STREET ADDRESS City-St-7IP CITY-ST-ZIP WINTER PARK FL Addition ☐ Change ☐ Delete TITLE KEEN. ALLAN E STREET ADDRESS 1031 W. MORSE BLVD, SUITE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME 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 changed, or on an attachment with an address, with all other like empowered.