2000 UNIFORM BUSINESS REPORT (UBR)

West Hi

SIGNATURE: By:

FILED DOCUMENT # LO1058 Apr 18, 2000 8:00 am Secretary of State 1. Entity Name WEST HILLS SHOPPING CENTER, INC. 04-18-2000 90071 026 ***150.00 Principal Place of Business Mailing Address 2401 PGA BLVD 2401 PGA BLVD SUITE 280 SUITE 280 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410-3516 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0137718 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WIENER, DAVID J Street Address (P.O. Box Number is Not Acceptable) 2401 PGA BLVD SUITE 280 PALM BEACH GARDENS FL 33410 Zip Code 8. The above named entity submi en/for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed me 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 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so 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. CR2E034 (9/99) DP TITLE Change | Addition TITLE ☐ Delete PRESTON, JOHN W.S. NAME NAME STREET ADDRESS STREET ADDRESS 2401 PGA BLVD CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☐ Change Addition ☐ Delete TITLE TITLE COHEN, PETER F NAME 2851 JOHN ST., SUITE 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARKHAM, ONT. CAN. CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE GREEN, ROBERT S NAME STREET ADDRESS STREET ADDRESS 2851 JOHN ST., SUITE 1 CITY-ST-ZIP CITY-ST-ZIP MARKHAM, ONT. CANADA ☐ Change Addition DVAS ☐ Delete TITLE TITLE BERNICK, LARRY NAME NAME STREET ADDRESS STREET ADDRESS 2401 PGA BLVD SUITE 280 CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE 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.

VICE President

1-20-00

Date

561-624-9500

Daytime Phone #