2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 01, 2001 8:00 am Secretary of State DOCUMENT # L15911 DRS. CLOWER, MOORE & MARUNIAK - JACKSONVILLE HEA 03-01-2001 91328 021 ***150.00 Principal Place of Business Mailing Address 1200 RIVERPLACE BLVD. 1200 RIVERPLACE BLVD. **STE 301** STE 301 *#UZ663U JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2966960 Not Applicable 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 CLOWER, JAMES W. Street Address (P.O. Box Number is Not Acceptable) 1200 RIVERPLACE BLVD, STE 301 JACKSONVILLE FL 32207 City Zip Code 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 rog stered agent and title if applicable DATE (NOTF: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 (Sec criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PD IIT F ☐ Deiete TITLE Change Addition CLOWER, JAMES W. 1200 RIVERPLACE BLVD., STE 301 STREE* ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST ZIP D (ITLE ☐ Delete □ Channe ☐ Addition MOORE, WILLIAM F. NAME 1200 RIVERPLACE BLVD., STE 301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Change Addition TITLE Deiete TITLE SACKETT, ELLEN NAME 1200 RIVERPLACE BLVD., STE 301 STRUET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP TITLE Delete CARTER, KYLE NAME DANIEL MARUNIAK 1200 Riverpeace Blvd Suite 301 Tacksonville Floudo 32207 1200 RIVERPLACE BLVD., STE 301 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-SI-ZIP JACKSONVILLE FL Change Addition TITLE Delete TITLE FARR, CHARLES H NAME NAME managuet MCKIBBEN 1200 RIVERPLACE BLVD., STE 301 STREET ADDRESS STREET ADDRESS 1200 Riverpeace Bird Si CITY - ST - ZIP CITY-ST-7IP JACKSONVILLE FL 32207 Jacksonuille, Flouda TITLE Delete TITLE ABRAM, DEBORAH C NAME NAME 1200 RIVERPLACE BLVD., STE 301 STREET ADDRESS STREET ADDRESS CITY-ST-Z!P JACKSONVILLE FL 32207

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 eath; that I am an officer or director of the corporation or the receiver or trusted suppowered 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.

SIGNATURE:

SIGNATURE AND TYPED O INTED NAME OF SIGNING OFFICER OF DIRECTOR

CR2E034 (10/00)