| DOCUMENT # L77893 1. Entity Name MARKHAM WOODS REALTY, INC. | | | | | | Mar 20, 2001 8:00 am Secretary of State 03-20-2001 90092 001 ***300.00 | | | | |
|--|---|--|----------------------|--|-------------|--|--|---------------|--------------------------------|------------------|
| Principal Place of Business 1766 ALAQUA DR LONGWOOD FL 32779 US | | Mailing Address 2200 GORDON DRIVE Altn. Jeff weiland Orkani. E. 32801 | | rge Ave. | # | 6 5 6 (| | (1)) elek 131 | 31 616 11 1 11 1 | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | DO NOT WRITE IN THIS SPACE | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | | | | | |
| City & Stat | te | City & State | | | 4. FEI Num | ber 59-3014074 | | | plied For t Applicable | |
| Zip | Country | Zip | Cour | ntry | | 5. Certifica | te of Status Desired | | 8.75 Add e Require | |
| | 6. Name and Address of Current I | Registered Agent | | Name | | 7. Name ar | d Address of New Regi | stered Ag | ent | |
| INTRASTATE REGISTERED AGENT CORPORATION C/O HOLLAND & KNIGHT, 701 BRICKELL AVENUE SUITE 3000 MIAMI FL 33131 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| MINUM LE 22/21 | | | | City | | | | FL | Zip Code | 9 |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After MAY 1, 2001 Make Check Payable | | | | will be \$5 epartment | 00 50.00 | 10. E | Election Campaign Finance rust Fund Contribution. | | Added | O May Be to Fees |
| 11. | V OFFICERS AND I | Delete | 12. | - | | ADDITION | S/CHANGES TO OFFICE | | Change | Addition |
| NAME STREET ADDRESS CITY-ST-ZIP | SEXTON, DAVID N 1167 THIRD STREET, S | | NAM STRE | | | | 729 IL NORTH, JU 34103-3555 | | | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD Defete DE GROOTE, MICHAEL H JR 1100 BURLOAK DRIVE. BULINGTON ONTARIO CANADA L7L6B2 | | | E Me Eet address 7-st-zip | | © Change ☐ Addition If INTERNATIONAL BLVD. URCINITON, DN, LAL 6WI | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVS PEKARUK, JERRY 1100 BURLOAK DR. BURLINGTON ONTARIO CANADA L7L6B2 | | | E ME EET ADDRESS (-ST-ZIP | | | WAL BLUG. | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV MARTYN, ROBERT W 11 VICTORIA STREET HAMILTON HMEX BERMUDA | ☐ Delete | - I | | | | | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV Delete DEGROOTE, GARY W 1100 BURLOAK DR. BURLINGTON ONTARIO CANADA L7L6B2 | | | .E ME EET ADDRESS (-ST-ZIP | _ | _ | NAC BLVD V. LIL BW1 | Q | Change | Addition |
| TITLE NAME STREET ADDRESS | | ☐ Delete | TITLI NAM STRE | | | | | | Change | ☐ Addition |

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.

SIGNATURE:

THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 5,2001