FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 01, 2001 8:00 am Secretary of State DOCUMENT # M 1/8615 1. Entity Name DANFORTH PROPERTIES, INC. 05-01-2001 90068 034 ***150.00 Principal Place of Business Mailing Address 3399 PGA BLVD 3399 PGA BLVD STE 450 STE 450 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 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 59-2562423 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PETER D. CUMMINGS & ASSOCIATES, Street Address (P.O. Box Number is Not Acceptable) 33 99 PGA BLVD., SUITE 450 CHASEN, DONALD L. 3399 PGA BLVD **STE 450** PALM BEACH GARDENS FL 33410 Zip Code PALM BEACH GARDENS 33410 statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named DAVID A. DEAN SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signal ered agent and title if applicable. 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PRESIDENT SECRETARY Change ☐ Addition ☐ Delete TITLE TITLE CUMMINGS, PETER D. PETER D. CUMMINGS NAME NAME 3399 PGA BLVD, SUITE 450 STREET ADDRESS 3399 PGA BLVD STE 450 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 TREASURER Addition Delete ☐ Change TITI F CHASEN, DONALD L NAME DAVID A. DEAN NAME 3399 PGA BLVD, SUITE 450 STREET ADDRESS 3399 PGA BLVD STE 450 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

SIGNATURE:

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRUTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

PETER D. CUMMINGS, PRES 4-16-01

561-630-6110

☐ Addition

Daytime Phone #

☐ Change