2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M81628

Entity Name: BOCA BAY PROPERTIES, INC.

FILED Mar 13, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 500 WATER ST JACKSONVILLE, FL 32202 LIS **Current Mailing Address: New Mailing Address:** 500 WATER ST S/C J-160 JACKSONVILLE, FL 32202 US FEI Number: 65-0087754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CROSBY, S A Name: Name: 301 W BAY ST Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: VΡ Title: Title: () Delete () Change () Addition Name: FAVORITE, F J Name: 500 WATER ST Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: **VPCS** () Delete Title: Title: () Change () Addition GEIERSBACH, RACHEL E Name: Name: 500 WATER ST Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: VΡ () Delete Title: () Change () Addition HOOD, R M Name: Name: Address: 301 WATER ST Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: RAO, N B Name: 301 W. BAY STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: () Delete Title: Title: () Change () Addition Name: WARD, M J Name: 500 WATER STREET Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RACHEL E GEIERSBACH VPCS 03/13/2003