LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

Mar 25, 2002 8:00 am **Secretary of State DOCUMENT #** M98000000828 03-25-2002 90019 008 ****50.00 1. Entity Name OAIC JACKSONVILLE LLC 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401 DO NOT WRITE IN THIS SPACE B0048143 2. Principal Place of Business 3. Mailing Address 1675 PALM BEACH LAKES BILVD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For WEST PALM BEACH, FL 65-0850604 Not Applicable Country Zip . Country \$5.00 Additional 33401 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent JOHN R. ERBEY DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 1675 PALM BEACH LAKES BLVD IN THIS SPACE Zip Code WEST PALM BEACH, FL 33401 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, typed or printed name of registered agent and title if applicable DATE FEE IS \$50.00 Make Check Payable to Department of State DUE BY MAY 1 MANAGING MEMBERS/MANAGERS MGR TITLE TITLE NAME WILLIAM C. ERBEY NAME STREET ADDRESS STREET ADDRESS 1675 PALM BEACH LAKES BLVD. CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33401 TITLE TITLE MGR NAME NAME RONALD M. FARIS STREET ADDRESS STREET ADDRESS 1675 PALM BEACH LAKES BLVD. CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33401 TITLE TITLE _ NAME NAME PETER S. HOLTON STREET ADDRESS STREET ADDRESS 1675 PALM BEACH LAKES BLVD. DONOTWRITE CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33401 TITLE IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

JOHN R. BARNES, SENIOR VICE PRESIDENT