FILED 2002 UNIFORM BUSINESS REPORT (UBR) Aug 19, 2002 8:00 am Secretary of State DOCUMENT # N0000005006 08-19-2002 90127 035 ****70.00 WORLD OLYMPIANS ASSOCIATION FOUNDATION, INC. Principal Place of Business Mailing Address ATTN: TICO PEREZ. ESQ. ATTN: TICO PEREZ, ESQ. 200 SOUTH ORANGE AVENUE SUITE 2300 200 SOUTH ORANGE AVENUE SUITE 2300 ORLANDO FL 32801 ORLANDO FL 32801-2. Principal Place of Business 3. Mailing Address Suite, AD #, etc. Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State FEI Number 59-3689199 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) A.G.C. CO. 200 S ORANGE AVENUE SUITE 2300 ORLANDO FL 32801 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. I am familiar with, and accept the obligations of registered agent. Same **SIGNATURE** DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) After September 13, 2002, \$5.00 May Be Make Check Payable to Election Campaign Financing Trust Fund Contribution. Added to Fees Department of State min. will be \$236.25. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete TITLE **Addition** TOOMEY, WILLIAM 2000 s. creange, ste 2300 STREET ADDRESS STREET ADDRESS 200 S. ORANGE AVE., STE., 2300 FL 32801 CITY-ST-ZIP ORlando CITY-ST-ZIF ORLANDO FL 32801 TITI F ☐ Delete ☐ Change Addition Liston Bochetle NAME DIA BA, EL HADJ A NAME , she 2300 200 S. Orange STREET ADDRESS STREET ADDRESS 200 S. ORANGE AVE., STE., 2300 CITY-ST-ZIP CITY-ST-ZIP 32801 ORLANDO FL 32801 TIT! F ☐ Delete TITLE Change Addition Elizabeth Ferris SZEWINSKA, IRENA NAME NAME e ste 2300 STREET ADDRESS 200 S. ORANGE AVE., STE., 2300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 ☐ Delete TITLE TITI F ☐ Change ☐ Addition **ELLIOTT, HERB** NAME NAME STREET ADDRESS 200 S. ORANGE AVE., STE., 2300 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32801 D ☐ Delete TITLE ☐ Addition FELLI, GILBERT NAME STREET ADDRESS 200 S. ORANGE AVE., STE., 2300 STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 CITY-ST-ZIP ☐ Delete TITLE □ Change ☐ Addition

2. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

NAME

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP CVRTLIK, BOB D

ORLANDO FL 32801

200 S. ORANGE AVE., STE., 2300

WATURE RESHABELLETTE

1 Au 02 305 446-6440