FILED 2002 UNIFORM BUSINESS REPORT (UBR) Feb 20, 2002 8:00 am Secretary of State DOCUMENT # N12276 FLORIDA CERTIFICATION BOARD, INC. 02-20-2002 90184 036 ****61.25 rincipal Place of Business Mailing Address IEAL MCGARRY **%NEAL MCGARRY** 1715 S. GADSDEN STREET 15 S. GADSDEN STREET LLAHASSEE FL 32301 TALLAHASSEE FL 32301 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2622949 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 'Name MCGARRY, NEAL Street Address (P.O. Box Number is Not Acceptable) 1715 S GADSDEN ST TALLAHASSEE FL 32301 Zip Code 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. A. MG barry 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FIDE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. President Bozzone, & Robert PO BOX 2507 TLE Change ☐ Addition TITLE **Delete** CONSTANTINO, MARK ME NAME 7000 N FED HWY 2ND FL REET ADDRESS STREET ADDRESS **BOCA RATON FL** West Palm Beach, FL TY-ST-ZIP CITY-ST-ZIP ÎLE ☐ Delete TITLE Change ★ Addition Harden, Elizabeth 4422 E. Columbus Ave LEWIS, KEVIN ΙME NAME 2101 MC GREGOR BLVD REET ADDRESS STREET ADDRESS Tampa FL 33605 TY-ST-ZIP ift myers fl CITY-ST-ZIP Lofgren, Jonathan 13800 66th Street North ☐ Change **Addition** TLE. Delete. TITLE. 👡 DOUGHTY, KAY MF NAME 801 COUILTER PLACE REET ADDRESS STREET ADDRESS TY-ST-ZIP Brandon Fl. CITY-ST-ZIP 4 ara 0 ŢLE ☐ Delete TITLE Change ☐ Addition **BOZZONE, ROBERT** ME NAME PO BOX 2507 REET ADDRESS STREET ADDRESS TY-ST-ZIP WEST PLAM BEACH FL CITY-ST-ZIP İLE ☐ Delete TITLE Change ☐ Addition DEVIT, LOIS ₩E. NAME 1550 S FRENCH AVE REET ADDRESS STREET ADDRESS SANFORD FL 33511 TY-ST-ZIP CITY-ST-ZIP ΪLΕ ☐ Delete TITLE Change ☐ Addition {ME NAME REET ADDRESS STREET ADDRESS

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 life empowered.

CITY-ST-ZIP

IGNATURE

. IY-ST-ZIP

Mayson: SmillEculpheal A. M'Garry

850-222-6314

CR2E037 (9/01)