2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # N93000002736 Jan 19, 2000 8:00 am Secretary of State 1. Entity Name ATAXIA TELANGIECTASIA CHILDREN'S PROJECT, INC. 01-19-2000 90281 004 ****78.75 Mailing Address Principal Place of Business 1 W CAMINO REAL 1 W CAMINO REAL STE. #212 STE. #212 BOCA RATON FL 33432-5966 **BOCA RATON FL 33442-3023** 2. Principal Place of Business 3. Mailing Address 668 South Military Trail 668 South MilitaryyTrai DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0427215 Deerfield Beach, Not Applicable Deerfield Beach, FL Country \$8.75 Additional Zin 5. Certificate of Status Desired Fee Required 33442 33442--Broward Broward 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) MARGUS, BRADLEY A 21645 CARTAGENA DRIVE 400 S. DIXIE HIGHWAY 21645 CATAGENA DRIVE Zip Code City FL **BOCA RATON FL 33428** 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. 1-11.00 SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Delete TITLE Rodriquez, Carlos A. TITI F DONOGHUE, MICHAEL NAME NAME STREET ADDRESS 5530 Banyan Drive 765 HOLLOW TREE RIDGE ROAD STREET ADDRESS CITY-ST-ZIP Coral Gables, FL 33156 CITY-ST-7IP DARIEN CT 06820 X Addition TITLE ☐ Change ☐ Delete TITLE D HIEBNER, JEFFREY D NAME Feeley, John D. 100 Lakeview Blvd NAME STREET ADDRESS 8 ACACIA-DRIVE __ 18 Miller Street --STREET ADDRESS CITY-\$T-ZIP Edison, NJ 08817 CITY-ST-ZIP MIDDLETOWN RI 02840 02842 Delete TITLE Addition TITLE NAME NAME MARGUS, ALBERT F JR Madison, Amy 1505 Red Oak Schertz, TX STREET ADDRESS STREET ADDRESS 621 SOUTHWEST MAYPOP COURT CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33432- 33486 ☐ Change ☐ Addition ☐ Delete TITLE TITLE MIDDLEBROOK, ROB NAME NAME STREET ADDRESS STREET ADDRESS 2101 RAINTREE-DR 34 Powder Hill Rd. CITY-ST-ZIP CITY-ST-ZIF Bedford, NH 03110 HRVING TX ☐ Change ☐ Addition TITLE ☐ Delete TITLE Jehlik, Greg NAME NAME 3616-W-TURNBERRY DR-237 Eliot Hill Rd. STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Natick, RI 01760 MEQUON WI ☐ Change ☐ Addition TITLE TITLE MARGUS, BRADLEY A NAME STREET ADDRESS STREET ADDRESS 21645 CARTAGENA DRIVE CITY-ST-ZIP CITY-ST-ZIP I BOCA RATON FL 33428 12. 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.

954-481-6611