2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N9400003600

FILED Jan 06, 2003 Secretary of State

Entity Name: ENTERPRISE DEVELOPMENT CORPORATION OF SOUTH FLORIDA

Current Principal Place of Business: New Principal Place of Business:

3701 FAU BLVD SUITE 210

BOCA RATON, FL 33431 US

New Mailing Address: Current Mailing Address:

3701 FAU BLVD SUITE 210

BOCA RATON, FL 33431 US

FEI Number: 65-0506917 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:

MARGULIES, MARK A NELSON, GREGORY 3701 FAU BLVD 3701 FAU BLVD SUITE 210 SUITE 210

BOCA RATON, FL 33431 US BOCA RATON, FL 33431 US

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: JANE SCHWARTZ 01/06/2003

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VCD (X) Change () Addition () Delete

LASHER, CHARLES ROWAN, EDWARD Name: Name: 1565 NORTH PARK DRIVE Address: 100 NE THIRD AVENUE Address:

City-St-Zip: WESTON, FL 33326 US City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: CD () Delete Title: CD (X) Change () Addition

MARGULIES, MARK Name: NELSON, GREGORY Name:

Address: 2700 S. COMMERCE PARKWAY STE 300 Address: 222 LAKEVIEW AVENUE 4TH FLOOR City-St-Zip: WESTON, FL 33334 City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD (X) Delete Title: () Change () Addition

NELSON, GREGORY Name: Name: 222 LAKEVIEW AVENUE 4TH FLOOR Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip:

TD () Delete SCHWARTZ, JANE E Title: Title: TD (X) Change () Addition

Name: Name: BATES, DAVID

7300 WEST CAMINO BLVD SUITE 106 777 SOUTH FLAGLER DR. STE 500 EAST Address: Address:

City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: WEST PALM BEACH, FL 33401

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY NELSON CD 01/06/2003