2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 17, 2000 8:00 am Secretary of State DOCUMENT # N94000005716 1. Entity Name MERRITT PARK PLACE GROUP, INC. 05-17-2000 90921 008 ****61.25 Principal Place of Business Mailing Address 321 PIONEER RD 321 PIONEER RD MERRITT ISLAND FL 32953 MERRITT ISLAND FL 32953-4274 医格尔特氏征 法法律 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3310405 Not Applicable Zip Country Zip 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 Street Address (P.O. Box Number is Not Acceptable) NATOWICH, SANDRA E 321 PIONEER RD MERRITT ISLAND FL 32953 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be \Box Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. VC. Change Addition TITLE ☐ Delete TITLE NAME CHAMPON, RICHARD NAME STREET ADDRESS STREET ADDRESS 3141 NEWFOUND HARBOR DR CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32952 TITLE ☐ Delete TITLE ☐ Change Addition NAME NATOWICH, SANDRA E STREET ADDRESS STREET ADDRESS 321 PIONEER RD CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32953 ☐ Change Addition ☐ Delete TITLE TITLE KOONTZ, LINGA KUNTZ, LINDA NAME STREET ADDRESS STREET ADDRESS 360 TANGERINE AVE CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32953 ☐ Delete TITLE ☐ Change □ Addition TITLE NAME NAME DAY, DICK STREET ADDRESS STREET ADDRESS 3785 LAURETTE RD CITY-ST-7IP CITY-ST-2IF MERRITT ISLAND FL 32952 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME MCGIRR. DEBRA NAME STREET ADDRESS STREET ADDRESS 264 N GROVE ST CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32952 TITLE Delete TITLE Change [Addition NAME JONES, DANIEL J. NAME STREET ADDRESS 140 W MERRITT ISLAND CAUSEWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MERRITT_ISLAND_FL_32952

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 attackment with an address, with all other the empowered.

SIGNATURE:

#28/00 321-452-7668

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR