2003 NOT-FOR-PROFIT CORPORATION

FILED Mar 06, 2003 8:00 am § Secretary of State **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # N97000004137 1. Entity Name 03-06-2003 90113 045 ****61.25 THE LOOPER GROUP, INC. Principal Place of Business Mailing Address 100 SECOND AVE S 100 SECOND AVE. S. STE 200 SUITE 200 SAINT PETERSBURG FL 33701 ST. PETERSBURG FL 33701 2. Principal Place of Business 3. Mailing Address 100 First Ave S. 100 First A Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Suite St. Petersburg 4. FEI Number 59-3386876 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Cookson ATHERHOLT, WAYNE D Street Address (R.C O. Box Number is Not Acceptable) FLORIDA INTERNATIONAL MUSEUM 25 SECOND ST. N., STE. 400 First Ave ST. PETERSBURG FL 33701 8. The above named eptity 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. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 49 ☐ Delete TITLE **Change** ☐ Addition ATHERHOLT, WAYNE D NAME Patti Roudolino NAME 720 4# Ave N St. Petersburg STREET ADDRESS 100 SECOND ST. N. STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33701 33701-2706 CITY-ST-ZIP ٧D TITLE Delete TITLE ☐ Addition CONNOLLY, JILL A NAME KATL Johansson NAME STREET ADDRESS **5858 CENTRAL AVE** 80 Beach Drive NE STREET ADDRESS CITY-ST-7IP SAINT PETERSBURG FL 33707 CITY-ST-ZIP St. Petusburg 337*01-3914* STD TITLE ☐ Delete TITLE ☐ Addition CARLSON, ERIC NAME NAME STREET ADDRESS 100 SECOND AVE., SUITE 200 STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33701 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

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

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

727-821-5166