2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000002650

Entity Name: MIDDLETOWNE PROJECT, INC.

FILED Apr 12, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1809 DEBARRY AVENUE ORANGE PARK, FL 32073 **Current Mailing Address: New Mailing Address:** 300 N.W. 12TH AVENUE MIAMI, FL 33128 FEI Number: 31-1599917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTORANO, SALVATORE 300 NW 12TH AVE MIAMI, FL 33128 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition EDMONSON, JAMES H Name: Name: 1350 BEVERLY ROAD, STE. 200 Address: Address: City-St-Zip: MCLEAN, VA 22101 City-St-Zip: Title: Title: () Delete () Change () Addition DOMINGUEZ, AUGSTIN Name: Name: Address: 300 N.W. 12TH AVENUE Address: City-St-Zip: MIAMI, FL 33128 City-St-Zip: Title: VPD () Delete Title: () Change () Addition SIBLEY, RUSSELL A JR Name: Name: 300 NW 12TH AVE Address: Address: City-St-Zip: MIAMI, FL 33128 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MARTORANO, SALVATORE Name: 300 N.W. 12TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33138 City-St-Zip: Title: () Delete Title: () Change () Addition SORGE, MARY Name: Name: 50 N. LAURA ST., 9TH FLOOR Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: () Delete Title: () Change () Addition RALEY, CLAIRE F Name: Name: Address: 300 N.W. 12TH AVENUE Address: MIAMI, FL 33128 City-St-Zip: City-St-Zip:

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: SAL MARTORANO VP 04/12/2002