2006 NOT-FOR-PROFIT CORPORATION

FILED Aug 07, 2006 8:00 am Secretary of State

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DOCUMENT # N99000002356 GAETA COMMERCIAL CENTER ASSOCIATION, INC. Principal Place of Business Mailing Address 50024353 4800 N FEDERAL HWY, SUITE 209A 4800 N FEDERAL HWY, SUITE 209A BOCA RATON, FL 33431 BOCA RATON, FL 33431 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 07272006 Chg-NP CR2E037 (4/06) City & State City & State Applied For 4. FEI Number 59-2511952 Not Applicable Zip Country Country \$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. URBANEK, AUGUST 4800 N FEDERAL HWY, SUITE 209A Street Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33431 Zip Code FL 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. 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) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be \Box Florida Department of State Due by September 6, 2006 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE Change X Delete GAETA, C CALVIN NAME NAME Urbanek, August STREET ADDRESS 13055 POND APPLE DR E STREET ADDRESS 4800 N. Federal Hwy, Ste 209A CITY-ST-ZIP NAPLES, FL 34119 CITY-ST-ZIP Baca Raton, FL 33445 X Change Addition n X Delete TITI F TITLE NAME PEARSE, RICHARD L JR NAME Urbanek, Gerald STREET ADDRESS 1449 WETHERINGTON WAY STREET ADDRESS 4800 N. Federal Hwy, Ste 209A CITY-ST-ZIP PALM HARBOR, FL 33756 CITY-ST-ZIP Boca Raton, FL 33445 D TITLE TITLE √ Delete GAETA, DOLORES NAME STREET ADDRESS Ragland, Kathleen U. STREET ADDRESS 3394 CERRITO CT 4800 N. Federal Hwy, Ste 209A CITY-ST-ZIP NAPLES, FL 34109 CITY-ST-ZIP Boca Raton, FL 33445 TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TELLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR