FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

02 MAY 15 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000087949

1. Entity Name
SGW, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1650 Prudential Drive	1650 Prudential Drive
Suite, Apt. #, etc.: 400	Suite, Apt. #, etc.: 400 · LEGAL DEPT
City & State: Jacksonville, FL	City & State: Jacksonville, FL
Zip: 32207 Country: USA	Zip: 32207 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3602269 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Lawrence Paine

Street Address (P.O. Box Number is Not Acceptable): 1650 Prudential Drive Suite 400

City: Jacksonville **FL** Zip Code: 32207

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Michael J. Shalley 1650 Prudential Drive Suite 400 Jacksonville, FL 32207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President/Treasurer Michael N. Regan 1650 Prudential Drive Suite 400 Jacksonville, FL 32207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Sharon R. Parks 1650 Prudential Drive Suite 400 Jacksonville, FL 32207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant Secretary Susan G. Whitlatch 1650 Prudential Drive Suite 400 Jacksonville, FL 32207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Bradford A. Slappey 1650 Prudential Drive Suite 400 Jacksonville, FL 32207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant Treasurer David F. Childers III 1650 Prudential Drive Suite 400 Jacksonville, FL 32207

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	700005678487--[illegible] -06/04/02--01092--007 ****150.00 ****150.00
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CR2E034B (12/01)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan G Whitlatch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #