FILED

2002 Uniform Business Report (UBR)

Apr 17, 2002 8:00 am Secretary of State DOCUMENT # P01000108116 1. Entity Name 04-17-2002 90071 011 ***150.00 AMI PROPERTIES, INC. Principal Place of Business Mailing Address 336 GROVE AVENUE SUITE B 336 GROVE AVENUE SUITE B WINTER PARK FL 32789 WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEi Number Applied For 59-3758304 Not Applicable Zip Country Country Zip \$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 RICHARD G. MOOKE SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 336 GROVE AVENUE, STE. B 1840 SW 22ND ST. 4TH FLOOR **MIAMI FL 33145** WINTER ARK 8. The above named entity submits this statement for the purpose of changing its registered office. registered agent, or both, in the State of Florida RICHALD G. MODRE, PRESIDE Signature, typed or printed name of registered agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (9/01) ☐ Delete ☐ Addition TITLE TITLE ☐ Change **PSD** NAME NAME MOORE, RICHARD G STREET ADDRESS STREET ADDRESS 336 GROVE AVENUE SUITE B CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 ☐ Addition TITLE TITI F ☐ Change Delete VTD NAME NAME ASHLEY, DAVID W STREET ADDRESS STREET ADDRESS 336 GROVE AVENUE SUITE B CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 Delete aTITLE -- - E Change JIB E> Addition 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 TITLE ☐ Delete TITLE ☐ Addition ☐ Change ر ، ، NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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

SIGNATURE:

changed, or on an attachment with

RICHARD G. MOORE

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 Block 12 if