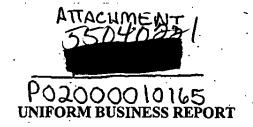
## 2003 FOR PROFIT CORPORATION 'UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED May 13, 2003 8:00 am Secretary of State 04-21-2003 90377 004 \*\*\*150.00

DOCUMENT # P02000010165  1. Entity Name ST. JOHN'S COMMONS INVESTOR, INC.					04-21-2003 903// 004 ***130.00	
Principal Place of Business 300 S.E. 2ND STREET FT. LAUDERDALE FL 33301		Mailing Address 300 S.E. 2ND STREET FT. LAUDERDALE FL 33301		· · · · · · · · · · · · · · · · · · ·		
2. Principal Place of Business 3. Ma		3. Mailing Address	Malling Address			11
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES	
City & Sta	te	City & State			4. FEI Number Applied For SO Not Applied For	
Zip	Country	. Country Zip C		у	5. Certificate of Status Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			<u>'                                    </u>	7. Name and Address of New Registered Agent		
				Name		
JONES, PATRICIA 300 S.E. 2ND STREET				Street Address (P.O. Box Number is Not Acceptable)		
FT. LAUDERDALE FL 33301						
			f	City FL Zip Code		
	named entity submits this statement for tions of registered agent.	the purpose of changing its	registered	office or registere	ed agent, or both, in the State of Florida. I am familiar with, and accept	21
SIGNATURE	Signeture, typed or printed name of registered agent a	nd vie if annihable (NOTE	- Registered A	gent eignature required	when reinstating) DATE	
	<del></del>		-			-
FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State					9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	·
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	-
mue .	PD	☐ Delete	TITLE		□ Change □ Addition	ᆈᇷ
NAME	STILES, TERRY W	_ 330,0	NAME	Į.		S B
STREET ADDRESS	300 S.E. 2ND STREET			ADDRESS		28
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		CITY-SI	r-ziP		_   뜂
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD   Eagon, Douglas P   300 S.E. 2ND STREET   FT. Lauderdale Fl. 33301	☐ Defete	TITLE NAME STREET	ADORESS 1-zip	☐ Change ☐ Addition	x   5
TITLE	VSD	☐ Delete	TITLE		☐ Change ☐ Addition	 on
- NAME	JONES, PATRICIA	<del>-</del>	NAME	J		ŀ
STREET ADDRESS CITY-ST-ZIP	300 S.E. 2ND STREET FT. LAUDERDALE FL 33301		STREET /	ADORESS ZIP	_	
TITLE NAME	VPD PALMER, STEPHEN R	☐ Delete	TITLE		. Change Additio	n
STREET ADDRESS	300 S.E. 2ND STREET		NAME STREET	ADDRESS .		
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	,	CITY-ST			1
TIFLE	VPD	☐ Delete	TITLE		Change Additio	n )
NAME CTRCET ADDRESS	STINE, JAMES W		NAME	unantes		-
STREET ADDRESS CITY-ST-ZIP	300 S.E. 2ND STREET FT. LAUDERDALE FL 33301		STREET A			1
TITLE	VPD	☐ Delete	TITLE		☐ Change ☐ Addition	╣
MAME	FERRERA, ROCCO	C Défére	NAME		Citality Citality	" }
STREET ADDRESS	300 S.E. 2ND STREET		STREET A			
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		CITY-ST			_{
indicated	on this report or supple <u>ment</u> al report is t	true and accurate and that m	y signature	shall have the sa	ction 119.07(3)(i), Florida Statutes. I further certify that the information arne legal effect as if made under oath; that I am an officer or director Florida Statutes; and that my name appears in Block 10 or Block 11 if	1.



11. CONTINUED

TITLE:

NAME: O'SHEA, DENNIS F.

STREET ADDRESS: 300 SE 2<sup>nd</sup> St.

CITY-ST-ZIP: Ft. Lauderdale, FL 33301