FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 2933N OF CORPORATIONS 199634496 P27444 DOCUMENT # SUMMIT INVESTMENT CORPORATION OF CLEARWATER Principal Place of Business Mailing Address 500 INTERNATIONAL CENTRE 500 INTERNATIONAL CENTRE 900 SECOND AVE., SOUTH 900 SECOND AVE., SOUTH MINNEAPOLIS MN 55402 MINNEAPOLIS MN 55402 3. Date Incorporated or Qualified 3a. Date of Last Report 12/27/1989 02/28/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 41-1301243 21 26 Not Applicable Suite, Apl. #, €to Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zia Country Zipi Country 8. This corporation has liability for intangible tax under s 199.032, Yes K No 24 Florida Statutes 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HEIM, WILLIS D. 82 Street Address (P.O. Box Number is Not Acceptable) 6604 GLEN ARBOR WAY 83 NAPLES FL 33999 84 City Zip Code Pursainnt to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office
or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am
familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signations, typical or points a manified ring steeled againt and title if again able (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition 1111 1 1 TeTLE N 484 **EXLINE STARR, ANN** 1.2 NAME **500 INTERNATIONAL CENTRE** STREET ADDRESS 1.3 STREET ADDRESS MINNEAPOLIS MN OUTV-S1-2IP 14 CHTY-ST-ZIP DELETE VSD Change Addition THELF 2 1 TITLE PAYMAR, ROBERT H. NAME 2.2 NAME **500 INTERNATIONAL CENTRE** 2.3 STREET ADDRESS IS TREET ADDIEDESS MINNEAPOLIS MN CHTY-ST-ZIF 24 City St ZiP TIFLE DELETE Change Addit:on 3 1 THUE SEXTON, WILLIAM D. MANA 3.2 NAME 500 INTERNATIONAL CENTRE STHEET ADDRESS 3.3 STREET ADDRESS MINNEAPOLIS MN C-1Y - 5T - ZH 3 4 CITY - ST - ZIP DELETE Change 101.6 4 1 TITLE Addition HEIM, WILLIS D. NAME **500 INTERNATIONAL CENTRE** 4.3 STREET ADDRESS STREET ADDRESS MINNEAPOLIS MN 4.4 CITY - \$1 - 2IP OHY-51-7P DELETE ☐ Addition Id. E 5.1 TOTALE 0.836 5.2 NAME STHEL! ACDRESS 5 3 STREET ADDRESS 011x+\$1+7P 54 CITY - ST - ZIP [iii] Delete [] Change ☐ Addition DEE 6 1 TITLE NAME 6.2 NAME STREET ACCURESS 6.3 STREET ADORESS 6.4 City-St-2te is voluntarily furnished and roughly for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 14. Ldo hereby certify that the information supplied certify that the information indicated on the oath; that I am an officer or director of Frue and accurate and that my signature shall have the same legal effect as if made under cred to execute this report as required by Chapter 607, Florida Statutes; and that my name

appears in Block 12 or Block

SIGNATURE:

CR2E034

612-338-1400