FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # P315 FISHERMAN'S LANDING CORPORATION Mailing Address Principal Place of Business 3a. Date of Last Report 3. Date Incorporated or Qualified 3/21/95 10 /31 / 1990 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 21 NO STRS . REAL ESTATE 26 C/O STRS - REALES MITE 22-3081083 Not Applicable \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired \Box BROAD ST Fee Required 275 EAST BROAD ST. 275 EAST 6. Election Campaign Financing \$5.00 May Be City & State City & State П Trust Fund Contribution 23 Columbus Ohio Ohio Added to Fees Columbus 8. This corporation has liability for intangible tax under s. 199.032, Country USA Yes No 43215 43215 Florida Statutes USA 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name THE PRENTICE - HALL CORPORATION SYSTEM INC Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES STREET SuitE 105 83 TALLAHA SEE, FI 32301 85 Zip Code 84 City v11. Pursuant to the provisions of Sections 607.050? 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 Florida. 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 (NOTE: Ricgistered Agent signature required when remistating) Signature, typied or printed name of regulared agent and trie if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. Change ☐ Addition DELETE 1. 1 T-TLE TITLE HERBERT L. DYER 1.2 NAME NAME STE EAST BROAD STREET 13 STREET ADDRESS STREET ADDRESS Columbus, On10 43215 1.4 CHTY - ST - ZIP CITY-ST ZIP Change Addition DELETE 2 1 1014 TITLE G. ROBERT BOWERS 2.2 NAME NAME 275 EAST BROAD STREET 2 3 STREET ADDRESS STREET ADDRESS COLUMBUS, ONIO 43215 2 4 CITY - \$1 - ZIP CITY - ST - ZIP Addition DELETE THE Change 3 1 1IILE TITLE STEPHAN A. MITCHELL 3.2 NAME NAME 275 EAST BROOK STREET 3.3 STREET ADDRESS STREET ADDRESS COLUMBUS 01710 3 4 CITY - \$1 - 7IP CITY-ST-ZP Change Addition DELETE 4.1 TITLE TiTLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY SI-ZIP City - S1 - ZiP Change Addition DELETE 5 1 TITLE 11116 5.2 NAME NAM: 800001788658 5.3 STREET, ADDRESS STREET ADDRESS -04/22/96--01038--002 5 4 CITY - \$1 - ZIP CITY-ST-ZIP ***200.00 Change Addition DELETE 6 1 TITLE 6.2 NAME 6.3 STREET ADDRESS \$1REFT ADDRESS

6.4 CH1Y - ST - ZIP

SIGNATURE

14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, over an attachment with an address. 4/9/96 (614)227-

(12/95)

CR2E034