FILED

1-04-01 941-365-717

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 22, 2001 8:00 am DOCUMENT # P9300006267 Secretary of State 1. Entity Name SYPRETT, MESHAD, RESNICK, LIEB, DUMBAUGH, JONES 01-22-2001 90114 040 ***150.00 Principal Place of Business Mailing Address 1900 RINGLING BLVD. 1900 RINGLING BLVD. SARASOTA FL 34236 SARASOTA FL 34236 00005910 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0381763 Not Applicable Zip Country Country \$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 DUMBAUGH, JOHN D Street Address (P.O. Box Number is Not Acceptable) 1900 RINGLING BLVD SARASOTA FL 34236 Zip Code City FL 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change XX Addition CR2E034 (10/00) DΡ DAVP TITLE ☐ Delete TITLE SYPRETT, JIM D NAME NAME PETER J. KROTEC STREET ADDRESS STREET ADDRESS 1900 RINGLING BLVD 1900 RINGLING BLVD. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL SARASOTA, FL 34236 DVST Change Addition ☐ Delete TITLE TITLE MESHAD, JOHN W NAME 1900 RINGLING BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL DAVT ☐ Addition TITLE ☐ Delete TITLE ☐ Change RESNICK: MICHAEL L NAME NAME 1900 RINGLING BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL Change ☐ Addition DAVS TITLE ☐ Delete TITLE LIEB, M J JR NAME NAME STREET ADDRESS STREET ADDRESS 1900 RINGLING BLVD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL ☐ Addition DAVP Change TITLE ☐ Delete TITLE DUMBAUGH, JOHN D NAME NAME STREET ADDRESS STREET ADDRESS 1900 RINGLING BLVD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL DAVP ☐ Delete TITLE ☐ Change ☐ Addition NAME Jones, Teresa D NAME STREET ADDRESS STREET ADDRESS 1900 RINGLING BLVD CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 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 Block 12 if

ier like empowered.

ED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURES

SIGNATURE AND TYPED OF