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95 APR 27 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000024838 (3)**

1. Corporation Name

SPREENFIELD HOLDINGS, INC.

100001466591
-04/27/95--01042--001
**10000.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
701 BRICKELL AVENUE SUITE 1600 (FIFTH) MIAMI FL 33131	801 BRICKELL AVENUE SUITE 1301 MIAMI FL 33131

3. Date Incorporated or Qualified: 04/02/1993
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / County — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / County — 30

4. FEI Number: 65-0404311 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has [illegible] for changes (s. 199.032, Florida Statutes) ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HUDSON, ROBERT F JR
701 BRICKELL AVENUE
SUITE 1600
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: John S. Sullivan
82 Street Address (P.O. Box Number is Not Acceptable)
83: ~~801 Brickell Avenue~~ Suite 1301
84 City: Miami — 85 Zip Code: FL 33131

11. Pursuant 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 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: [signature] John S. Sullivan, Vice-President 4/18/95
Signature of typed or printed name of registered agent and the # applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	Director	☒ Change ☐ Addition
NAME	HUDSON, ROBERT F JR	12 NAME	John S. Sullivan	
STREET ADDRESS	701 BRICKELL AVENUE, SUITE 1600	13 STREET ADDRESS	801 Brickell Avenue, Suite 1301	
CITY ST ZIP	MIAMI FL 33131	14 CITY ST ZIP	Miami, FL 33131	
TITLE	V	21 TITLE		☐ Change ☐ Addition
NAME	SULLIVAN, JOHN S	22 NAME		
STREET ADDRESS	801 BRICKELL AVENUE, SUITE 1301	23 STREET ADDRESS		
CITY ST ZIP	MIAMI FL 33131	24 CITY ST ZIP		
TITLE	S	31 TITLE	Secretary	☒ Change ☐ Addition
NAME	BARRETT, JAMES H	32 NAME	John S. Sullivan	
STREET ADDRESS	701 BRICKELL AVENUE, SUITE 1600	33 STREET ADDRESS	801 Brickell Avenue, Suite 1301	
CITY ST ZIP	MIAMI FL 33131	34 CITY ST ZIP	Miami, FL 33131	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

DP 4/27

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] John S. Sullivan 1995 (305)381-8340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

015077 CP