## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 06, 2000 8:00 am DOCUMENT # P93000025953 1. Entity Name **Secretary of State** ROCAILLE ACQUISITION SUBSIDIARY INC. 03-06-2000 90067 002 \*\*\*150.00 Principal Place of Business Mailing Address 1675 PALM BEACH LAKES BLVD., STE, 1002 1675 PALM BEACH LAKES BLVD., STE. 1002 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401-2119 B0033249 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0447869 Not Applicable Zip Country Zip 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 Name ERBEY, JOHN R Street Address (P.O. Box Number is Not Acceptable) XBERKELEX XEDERALXBANK XX THUST XESR 1675 PALM BEACH LAKES BLVD., STE. 1002 WEST PALM BEACH FL 33401 City Zip Code 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) ر اور ويه چېد 🗖 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D/C TITLE TITLE Change Addition CR2E034 (9/99 ☐ Delete ERBEY, WILLIAM C. NAME NAME STREET ADDRESS 1675 PALM BEACH LAKES BLVD., STE. 1002 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401 CITY-ST-ZIP TITLE ☐ Delete TITLE XII Change Addition REICH, CHRISTINE A. NAME NAME 1675 PALM BEACH LAKES BLVD., STE. 1002 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/A WEST PALM BEACH FL 33401 TITLE \_ 🔲 Delete SVP X Change ☐ Addition BARNES, JOHN R. NAME NAME 1675 PALM BEACH LAKES BLVD., STE. 1002 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401 CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition ERBEY, JOHN R STREET ADDRESS 1675 PALM BEACH LAKES BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 SVP® TITLE ☐ Delete TITLE Change Addition ZEIDMAN, MARK S NAME NAME 1675 PALM BEACH LAKES BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401 CITY-ST-ZIP TITLE ☐ Delete SVP/AS X Change TITLE ☐ Addition DONATO, TRINI L NAME NAME 1675 PALM BEACH LAKE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE:

TRINI L. DONATO, SENIOR VP

561-682-8000

Date

Daytime Phone #