2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am Secretary of State DOCUMENT # P93000042729 1. Entity Name NORDIC OF FLORIDA DEVELOPMENT, INC. 05-28-2002 91631 037 ***550.00 Principal Place of Business Mailing Address 4520 4TH AVE. EAST 4520 4TH AVE. EAST よりりのすさ **BRADENTON FL 34208 BRADENTON FL 34208** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0413516 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired_ ____ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAMLIN, CURTIS D Street Address (P.O. Box Number is Not Acceptable) 1205 MANATEE AVENUE WEST **BRADENTON FL 34205** 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) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition KEATING, KENNETH D NAME NAME STREET ADDRESS 4520 4TH AVE. E. STREET ADDRESS CITY-ST-ZIP **BRANDENTON FL 34208** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME WORTHINGTON, NORMAN A NAME STREET ADDRESS 4074 ROBERTS POINT RD. STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34242 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME Keating, Brenda J NAME STREET ADDRESS 4520 4TH AVE. EAST STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34208** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-7IP

SIGNATURE: ^