2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 29, 2002 8:00 am Secretary of State DOCUMENT # P93000046893 1. Entity Name NEAL COMMUNITIES OF UNIVERSITY PARK, INC. 04-29-2002 90009 030 ***150.00 Principal Place of Business Mailing Address 3711 CORTEZ ROAD WEST 3711 CORTEZ ROAD WEST **BRADENTON FL 34210 BRADENTON FL 34210** 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 65-0422359 Not Applicable 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 OLSON, ANN M. Box Number is Not Acceptable) 3711 CORTEZ RD W **STE 300 BRADENTON FL 34210** 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 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. 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 Change ☐ Addition NAME SOCHAR, MARK NAME 3711 CORTEZ ROAD, WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34210** CITY-ST-ZIP SD Delete TITLE S D Change NAME OLSON, ANN M NAME STREET ADDRESS 3711 CORTEZ RD W STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** denton FL 34210 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NEAL; PATRICK-K- ---- ~ NAME STREET ADDRESS 3711 CORTEZ RD W STE 300 STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34210 CITY-ST-ZIP Tille ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP

CR2E034 (9/01)

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 Statules; 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.