2001 UNIFORM BUSINESS REPORT (UBR) FILED May 14, 2001 8:00 am Secretary of State DOCUMENT # P94000018212 1. Entity Name FLRC 2, INC. 05-14-2001 90091 020 ***150.00 Mailing Address Principal Place of Business 54 COREY AVE 54 COREY AVE ST PETERSBURG BEACH FL 33706 ST PETERSBURG BEACH FL 33706 2. Principal Place of Business 3. Mailing Address AVE .orey DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For 4. FEI Number 59-3228803 Not Applicable Country PINELLAS \$8.75 Additional 5. Certificate of Status Desired 706 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ENGLANDER, LEONARD S Street Address (P.O. Box Number is Not Acceptable) 5959 CENTRAL AVE STE 201 ST PETERSBURG FL 33710 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150,00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Addition CED TITLE CEO ☐ Delete TITLE NAME JOHN E STROSS NAME STREET ADDRESS STREET ADDRESS 54 COREY AVE 33706 CITY-ST-ZIP PETE CITY-ST-ZIP ST.PETE BCH FL ☐ Addition Change **Delete** TITLE STD NAME RICHARD A. TADPAN NAME STREET ADDRESS STREET ADDRESS 54 CORY AVE CITY-ST-ZIP CITY-ST-ZIP ST.PETE BCH FL Change ☐ Addition TITLE ☐ Delete LEWIS NAME GBD RGE LEWIS. GEORGE NAME ₩1E STREET ADDRESS Corby STREET ADDRESS 54 COREY AVE 33706 CITY-ST-ZIP BEACH. CITY-ST-ZIP ST PETERSBURG BEACH FL Change ☐ Addition TITLE □ Delete SRV

NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the corporation or the feceiver 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 attackment with an address with an other like empowered.

NAME

TITLE

NAME

TITLE

Delete

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TIT! F

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

PHILLIPS, JOHN

54 COREY AVE

54 COREY AVE

SRV

ST PETERSBURG BEACH FL

CHANDLER, RICHARD

ST PETERSBURG FL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/01 7273678641 #29

33706

■ Addition

☐ Addition

Change

☐ Change

OL/#503740