2002 UNIFORM BUSINESS REPORT (UBR)

Feb 18, 2002 8:00 am Secretary of State DOCUMENT # P94000029268 1. Entity Name 02-18-2002 90009 039 ***150 750 ASSOCIATES, INC. Principal Place of Business Mailing Address 4830 W KENNEDY BLVD SUITE 750 4830 W KENNEDY BLVD SUITE 750 **TAMPA FL 33609 TAMPA FL 33609** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3243727 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 HALL, W CRAIG Street Address (P.O. Box Number is Not Acceptable) 4830 W KENNEDY BLVD SUITE 750 **TAMPA FL 33609** 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. [] Change ☐ Addition Delete TITLE TITLE NAME NAME ARCURI, SHIRLEY C STREET ADDRESS STREET ADDRESS 4830 W KENNEDY BLVD SUITE 750 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33609 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME BERGMANN, CHARLES E STREET ADDRESS STREET ADDRESS 4830 W KENNEDY BLVD SUITE 750 CITY-ST-ZIP CITY-ST-7IP **TAMPA FL 33609** Change Addition TITLE TITLE Delete D NAME NAME CASPER, THOMAS D STREET ADDRESS STREET ADDRESS 4830 W KENNEDY BLVD SUITE 750 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33609 ☐ Change Addition ☐ Delete TITLE TITLE NAME HALL, W CRAIG NAME STREET ADDRESS STREET ADDRESS 4830 W KENNEDY BLVD SUITE 750 CITY-ST-7IP CITY-ST-ZIP TAMPA FL 33609 ☐ Change ☐ Addition □ Delete TITLE D٧ NAME NAME Morse, John S STREET ADDRESS STREET ADDRESS 4830 W KENNEDY BLVD SUITE 750 CITY-ST-7IP CITY-ST-ZIP **TAMPA FL 33609** ☐ Delete TITLE Change Addition NAME NAME musial, a j jr STREET ADDRESS 4830 W KENNEDY BLVD SUITE 750 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33609 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

SIGNATURE:

SIGNATURE AND TYPED OR PRI TED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Attack Went # P94000019368 736562

D PELLEGRINO, VICTOR J. 4830 W. Kennedy Blvd., Suite 750 Tampa, FL 33609

D TARACKS, BARRY K. 4830 W. Kennedy Blvd., Suite 750 Tampa, FL 33609