2000 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2000 8:00 am Secretary of State DOCUMENT # **P94000072330** SUMMIT AT SOUTHPOINT CORPORATION 04-25-2000 90068 020 ***150.00 Principal Place of Business Mailing Address 800 N. MAGNOLIA. SUITE 1008' 800 N. MAGNOLIA, SUITE 1008' ORLANDO FL 32803 ORLANDO FL 32803-3251 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 1400 Suite, Apt. #, etc. 1400 Applied For 4. FEI Number City & State 59-3270911 Not Applicable \$8.75 Additional Country Zip Country Zin 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRAZIEL, DANNIS D Street Address (P.O. Box Number is Not Acceptable) 800 N MAGNOLIA AVE SUITE 100 SUITE 1400 ORLANDO FL 32803 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 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 10. 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) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DP ☐ Addition TITLE Delete DECKER, RAINER NAME Roderbruch strasse 35 STREET ADDRESS KARL-WIECHERT-ALLEE 50 STREET ADDRESS 30655 Hannover, Germany CITY-ST-ZIP HANNOVER GE CITY-ST-7IP Delete TITLE TITLE 800 N. Magnolia Ave., Suite 1400 BRAZIEL DENNIS D NAME STREET ADDRESS 800 N. MAGNOLIA AVE. SUITE 1000 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 ☐ Change ☐ Addition ☐ Delete TITLE TITLE GEORG. DIETMAR NAME NAME STREET ADDRESS 150 E 42ND ST STREET ADDRESS **NEW YORK NY 10017** CITY-ST-ZIP CITY-ST-ZIP Addition Delete Change TITLE TITLE MURDOLO, SAUNDRA NAME NAME STREET ADDRESS STREET ADDRESS 150E 42ND ST CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10017 X** Change ☐ Addition TITLE ☐ Delete STORE, CARSTEN NAME NAME Roderbruchstrasse 35 STREET ADDRESS STREET ADDRESS KARL-WIECHERT-ALLEE 30655 Hannover, Germany CITY-ST-7IP CITY-ST-ZIP HANNOVER GE 30625 Assistant Treasurer D. Mallory Walters 800 N. Magnolia Ave. Suite 1400 □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Orlando, Florida CITY-ST-ZIP

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 ke empowered.

REDDENNIS D. Braziel 4/18/2000