2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P95000006112 Apr 03, 2000 8:00 am Secretary of State 1. Entity Name LANTANA NAPLES, INC. 04-03-2000 90147 004 ***150.00 Principal Place of Business Mailing Address 1300 THOMASWOOD DRIVE 1300 THOMASWOOD DRIVE TALLAHASSEE FL 32312 TALLAHASSEE FL 32312-2914 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0549691 Not Applicable Zip Country 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 BIST, MICHAEL P Street Address (P.O. Box Number is Not Acceptable) 1300 THOMASWOOD DRIVE TALLAHASSEE FL 32312 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 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 \mathbf{X} (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE ☐ Change Addition TITLE ☐ Delete ROGERS, GAYLE M NAME NAME STREET ADDRESS **401 CHESTNUT STREET SUITE 500** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHATTANOOGA TN 37402 X Delete ST ☐ Addition X Change TITLE TITLE Richard V. Spurling ROGERS, WILLIAM T NAME STREET ADDRESS 1300 THOMASWOOD DRIVE STREET ADDRESS 401 Chestnut Street, Suite 500 CITY-ST-ZIP TALLAHASSEE FL 32312 CITY-ST-ZIP Chattanooga, TN 37402 ☐ Change Addition TITLE Delete TANERKSLEY, RAYBURN H NAME STREET ADDRESS STREET ADDRESS 401 CHESTNUT ST. STE 500 CITY-ST-ZIF CITY-ST-ZIP CHATTANOOGA TN ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 like empowered.

SIGNATURE: Richard V. Spreung 3-24-90 423-756-2268

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Date Dayline Phone #

CR2E034 (9/99)