2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State
03-11-2002 90061 033 ***150.00

DOCUMENT # P95000016364

1. Entity Name
WILLIAMS & LEININGER, P.A.

Principal Place of Business	Mailing Address
250 AUSTRALIAN AVENUE SOUTH 1 CLEARLAKE CENTER. SUITE 1102 WEST PALM BEACH FL 33401	250 AUSTRALIAN AVENUE SOUTH 1 CLEARLAKE CENTER. SUITE 1102 WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1555 Palm Beach Lakes Blvd	1555 Palm Beach Lakes Blvd
Suite, Apt. #, etc.: Suite 301, Wachovia Tower	Suite, Apt. #, etc.: Suite 301, Wachovia Tower
City & State: West Palm Beach FL	City & State: West Palm Beach, FL
Zip: 33401 — Country: Palm Beach	Zip: 33401 — Country: Palm Beach

4. FEI Number 65-0559319 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEININGER, ESQ C S 250 AUSTRALIAN AVE SOUTH #1102 1 CLEARLAKE CENTER WEST PALM BEACH FL 33401	Name: Street Address (P.O. Box Number is Not Acceptable): 1555 Palm Beach Lakes Blvd. #301 Wachovia Tower City: West Palm Beach — FL — Zip Code: 33401

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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JAMES O WILLIAMS, JR 250 AUSTRALIAN AVE, SOUTH, SUITE 1102 WEST PALM BEACH FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 1555 Palm Beach Lakes Blvd. Suite 301 West Palm Beach FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LEININGER, CARRI S 250 AUSTRALIAN AVE SOUTH SUITE 1102 WEST PALM BCH FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 1555 Palm Beach Lakes Blvd. Suite 301 West Palm Beach FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/01)

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: Carri S. Leininger — 2/2/02 — 561-615-5666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #