2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P95000062332** 1. Entity Name

DOMINION DEVELOPMENT CORPORATION

FILED Apr 19, 2000 8:00 am Secretary of State

04-19-2000 90158 001 ***300.00

Mailing Address Principal Place of Business 2201 SAWGRASS VILLAGE DRIVE P O BXO 2105 PONTE VEDRA BEACH FL 32004-2105 PONTE VEDRA BEACH FL 32082 U & U 4 2. Principal Place of Business 3. Mailing Address 330 Highway A1A North same as above Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 324 City & State 4. FEI Number Applied For City & State 59-3331313 Ponte Vedra Beach, FL Not Applicable Zip 32082 Country Country \$8.75 Additional 5. Certificate of Status Desired US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRANT, MOORE SAPP, MACDONALD & WELLS, P.A. Street Address (P.O. Box Number is Not Acceptable) **50 NORTH LAURA STREET SUITE 3100** JACKSONVILLE FL 32202 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. *OFFICERS AND DIRECTORS 12. ☐ Addition D TITLE Change ☐ Delete TITLE KASHOU, JOHN KASHOU, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 2201 SAWGRASS VILLAGE DRIVE 330 Hwy A1A North, #324 CITY-ST-ZIP CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 Ponte Vedra Beach, FL 32082 Addition ☐ Delete TITLE TITLE NAME NAME KASHOU, JAMES KASHOU, JAMES STREET ADDRESS STREET ADDRESS 2201 SAWGRASS VILLAGE DR 330 Hwy A1A North, #324 CITY-ST-ZIP CITY-ST-ZIP PONTE VEDRA BEACH FL Ponte Vedra Beach, FL 32482 ☐ Addition ☐ Delete TITLE TITLE AVP KASHOU, BRAHIM J NAME NAME KASHOU, BRAHIM J. STREET ADDRESS STREET ADDRESS 2201 SAWGRASS VILLAGE DR 330 Hwy A1A North, #324 CITY-ST-ZIP CITY-ST-ZIP PONTE VEDRA BEACH FL Ponte Vedra Beach, FL 3208200 Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete 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

A CALINET SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR John Kashou

904-285-0550