2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 19, 2001 8:00 am Secretary of State **DOCUMENT # P95000093916** 1. Entity Name 2502 ROCKY POINT DRIVE INC. 03-19-2001 90500 034 ***150.00 Mailing Address Principal Place of Business 1801 HERMITAGE BLVD 1801 HERMITAGE BLVD SUITE 600 SUITE 600 TALLAHASSEE FL 32308 TALLAHASSEE FL 32308 HS HS 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 36-4057655 Not Applicable Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name_ TODD, DAVID E Street Address (P.O. Box Number is Not Acceptable) 1801 HERMITAGE BLVD SUITE 100 TALLAHASSEE FL 32308 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 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. \Box Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. DVAT X Change ☐ Addition ☐ Delete TITLE TITLE Lynne M. Gray BENNETT, DOUGLAS W NAME NAME 1801 Hermitage Blvd., Suite 600 STREET ADDRESS **1801 HERMITAGE BOULEVARD** STREET ADDRESS Tallahassee, FL 32308 CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32308 X Addition Change TITLE ☐ Delete TITLE Thomas M. McCarthy NAME TOGNARELLI, MAURY NAME 180 N. LaSalle Street, Suite #3400 STREET ADDRESS STREET ADDRESS 180 N LASALLE ST CITY-ST-ZIP Chicago, IL 60601 CITY-ST-ZIP CHICAGO IL 60601 Change ☐ Addition ☐ Delete TITLE NAME BURDI, THOMAS M NAME STREET ADDRESS STREET ADDRESS 180 N. LASALLE STREET CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60601 ☐ Addition ☐ Channe DVAS ☐ Delete TITL € NAME HORTON, JAMES W NAME STREET ADDRESS 1801 HERMITAGE BLVD #600 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TALLAHASSEE FL 32308 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME SMITH, ROGER E NAME STREET ADDRESS 180 N. LASALLE STREET STREET ADORESS CITY-ST-7IP CITY-ST-ZIP CHICAGO IL 60601 ☐ Addition ☐ Change DVAT X Delete TITLE TITLE

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Douglas W. Bennett, Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTE

QUICK, LYNNE

1801 HERMITAGE BLVD #600

TALLAHASSEE FL 32308

NAME

STREET ADDRESS

CITY-ST-ZIP

850/488-4406