2001 UNIFORM BUSINESS REPORT (UBR)

Sep 12, 2001 8:00 am Secretary of State P96000001072 DOCUMENT # 1. Entity Name 09-12-2001 90006 036 ***550.00 TECHNOLOGICAL REAL ESTATE, INC. Principal Place of Business Mailing Address 3521 COLEMAN COURT 3521 COLEMAN COURT LAFAYETTE IN 47902 LAFAYETTE IN 47902 2. Principal Place of Business 3. Mailing Address P.O. Box 1668 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3373341 AFAYETTE, IN ✓ Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required TIPPECANOE 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SPONAGLE, KENNETH treet Address (P.O. Box Number is Not Acceptable) 18808 Pinnacle Court 17718 NATHANS DRIVE TAMPA FL 33647 Zip Code <u>Tampa</u> 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 ☐ Addition CR2E034 (5/01 TITLE ППЕ ☐ Delete SPONAGLE, KENNETH E NAME 18808 Pinnacle Court NAME STREET ADDRESS 17718 NATHANS DRIVE STREET ADDRESS Tampa, FL 33647 TAMPA FL 33647 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME MILLER, MARLOW STREET ADDRESS **3730 AGATE COURT** STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP Sanibel FL 33957 Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI E 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.

FILED