## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: DE BELLE MOTOLES SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

| DOCUMENT # P96000049801   |   |  |   |  |  | payerose                                   |   |                                    |                          |                          |  |
|---|---|--|---|--|--|--|---|------------------------------------|--------------------------|--------------------------|--|
|   |   |  |   |  |  |  | <b></b>                                 | /                                  |                          |                          |  |
| 1. Entity Name SEMINOLE PROPERTIES I, INC.  |   |  |   |  |  |  | . 1                                     | FILE                               | )                        |                          |  |
| -   |   |  |   |  |  |  | 02 MA                                   | R 25 Ph                            | 3. 38                    |                          |  |
| Principal Place<br>6300 STIRLING<br>HOLLYWOOD   | ROAD  | 6300 STIRLING I  | Mailing Address 6300 STIRLING ROAD HOLLYWOOD FL 33024 |  |  | SECRETATY OF STATE<br>TALLAMACLEE, FLORICA |   |                                    |                          |                          |  |
| 2. Principal P  | ace of Business   | 3. Mailing Addre   | 3. Mailing Address                                    |  |  |  |   |                                    |                          |                          |  |
| Suite, Apt.   | #, etc.   | Suite, Apt. #, ∈   | Suite, Apt. #, etc.                                   |  |  | DO NOT WRITE IN THIS SPACE                 |   |                                    |                          |                          |  |
| City & State  | 9   | City & State   | City & State  |  |  | Et Number                                  | 65-0713844                              | 1                                  | <del></del>              | olied For<br>Applicable  |  |
| Zip   | Country   | Zip  | Zip Cour  |  | <b>5.</b> C                                      | ertificate o                               | of Status Desired                       |                                    | 8.75 Addi<br>ee Required |                          |  |
| 6. Name and Address of Current Registered Agent   |   |  |   |  | 7. Name and Address of New Registered Agent Name |  |   |                                    |                          |                          |  |
| DORSKY, ERIC ESQ.   |   |  |   | Street Address (P.O. Box Number is Not Acceptable) |  |  |   |                                    |                          |                          |  |
| 7320 GRIFFIN ROAD, SUITE 220<br>DAVIE FL 33314  |   |  |   |  |  |  |   | <del></del>                        |                          |                          |  |
| DAVILTE   | 55514   |  | City  |  |  |  | <u></u>                                 | FL                                 | Zip Code                 | -                        |  |
| 8. The above  | named entity submits this sta                                     | atement for the purpose of cha   | nging its registe                                     | red office or re                                   | egistered age                                    | ent, or both                               | n, in the State of F                    | <u> </u>                           | .l                       |                          |  |
|   |   |  |   |  |  |  |   |                                    |                          |                          |  |
| SIGNATURE.  | Signature, typed or printed name of regi                          | istered agent and title if applicable.   | (NOTE: Registe  | red Agent signature                                | required when re                                 | nstating)                                  |   | DATE                               |                          |                          |  |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)    Tax filing requirement and elects to do so. |   |  |   | e will be \$550                                    | 0.00   |  | ction Campaign Fi<br>st Fund Contributi |                                    |                          | May Be<br>to Fees        |  |
| 11.   |   | ERS AND DIRECTORS  | 12  |  | 1  | DITIONS/                                   | CHANGES TO OF                           | FICERS AND                         | DIRECTORS                | IN 11                    |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | DPTS<br>BILLIE, JAMES E<br>6300 STIRLING RD<br>HOLLYWOOD FL 33024 | /  | , NA<br>ST  | TLE<br>IME<br>REET ADDRESS<br>TY-ST-ZIP            |  | ice  | 4+                                      | acled                              |                          | Addition                 |  |
| TITLE NAME STREET ADDRESS CITY'-ST-ZIP  |   | □ 0 <sub>1</sub>   | NA<br>ST  | TLE<br>AME<br>TREET ADDRESS<br>TY-ST-ZIP           |  | 10   | 0005;<br>-04/15<br>***16;               | 2 <b>71</b> 2<br>/02010<br>28.75 * | )1801<br>  :***150       | □ Addition<br>LS<br>).00 |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | □ D  | N/<br>ST  | TLE<br>AME<br>TREET ADDRESS<br>TY-ST-ZIP           |  |  |   |                                    | ☐ Change                 | ☐ Addition               |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | ,  | N/<br>ST  | TLE<br>AME<br>TREET ADDRESS<br>TY-ST-ZIP           |  |  |   |                                    | ☐ Change                 | Addition Addition        |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | □ o  | N/<br>S1  | TLE<br>AME<br>Treet address<br>TY-ST-ZIP           |  |  |   |                                    | ☐ Change                 | ☐ Addition               |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | □ D  | N/<br>S1  | TLE<br>AME<br>TREET ADDRESS<br>TY-ST-ZIP           |  |  |   |                                    | ☐ Change                 | ☐ Addition               |  |
| حمدهما المسا  | l ee this roomt or quantamant                                     | pplied with this filing does not<br>al report is true and accurate<br>ustee empowered to execute t | and that my clar                                      | nati iro enali nav                                 | de the same i                                    | еда епес                                   | a as a made unde                        | r Gain. Inal i ai                  | III all Ullice           | Of Gillector 1           |  |

Page 2002

## 2002 Uniform Business Report Seminole Properties I, Inc. Document No. P96000049801

Section 12 Additions

Director Mitchell Cypress 6300 Stirling Road Hollywood, FL 33024

Director David Cypress 6300 Stirling Road Hollywood, FL 33024

Director John Wayne Huff, Sr. 6300 Stirling Road Hollywood, FL 33024

Director/Treasurer Max B. Osceola, Jr. 6300 Stirling Road Hollywood, FL 33024

President
Jim Shore
6300 Stirling Road
Hollywood, FL 33024

Vice President/Secretary Agnes Billie Motlow 6300 Stirling Road Hollywood, FL 33024