2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other

FILED DOCUMENT # P9600075737 Apr 27, 2000 8:00 am Secretary of State BUYERS ADVANTAGE REALTY, INC. 04-27-2000 90091 004 ***150.00 Principal Place of Business Mailing Address 2100 CONSTITUTION C/O JAMES F RIDELL PA 3400 S TAMIAMI TRAIL SARASOTA FL 34231 SARASOTA FL 34239-6093 3. Mailing Address 2. Principal Place of Business Riddell & Luzier DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 3400 S. Tamiami Trail Applied For City & State 4. FEI Number City & State 65-0696931 Sarasota, Florida Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 34239 US 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RIDDELL, JEFFERSON F Street Address (P.O. Box Number is Not Acceptable) 3400 S TAMIAMI TRAIL SARASOTA FL 34239 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 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, 2000 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. DTS DPST XX Change Addition TITLE ☐ Delete TITLE Pirola, Marylouise A. PIROLA, MARYLOUISE A NAME NAME 2100 CONSTITUTION BLVD STE 145 STREET ADDRESS 2100 Constitution Blvd. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34231 Sarasota, Florida 34231 XX Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME Pirola, Timothy J. STREET ADDRESS STREET ADDRESS 2100 Constitution Blvd CITY-ST-ZIP Sarasota, Florida 34231 CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

J. PIRO/A TROS