

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Feb 28, 2000 08:00 AM****Secretary of State****DOCUMENT # P96000082917**1. Entity Name  
ESI DOSWELL GP II, INC.**Principal Place of Business**

700 UNIVERSE BOULEVARD

JUNO BEACH

FL

33408

**Mailing Address**

ATTN: FRANCES M. CARPENTER

700 UNIVERSE BOULEVARD

JUNO BEACH

FL

33408

**2. Principal Place of Business**

Suite, Apt. #, etc.

**3. Mailing Address**

ATTN: RITA W. COSTANTINO

Suite, Apt. #, etc.

700 UNIVERSE BOULEVARD

City &amp; State

City &amp; State

JUNO BEACH

FL

Zip

Country

Zip

Country

33408

**4. FEI Number****65-0704961**

Applied For

Not Applicable

**5. Certificate of Status Desired**☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**LEON J.E.  
9250 WEST FLAGLER STREET

MIAMI

33174

FL

US

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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)

**02/28/2000**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE DT ☐ Delete  
NAME BOYLAN PETER  
STREET ADDRESS 700 UNIVERSITY BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE S ☐ Delete  
NAME CARPENTER FRANCES M.  
STREET ADDRESS 700 UNIVERSITY BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE V ☐ Delete  
NAME SMITH GLENN E.  
STREET ADDRESS 700 UNIVERSITY BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE DP ☐ Delete  
NAME YACKIRA MICHEAL W  
STREET ADDRESS 700 UNIVERSITY BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE DV ☐ Delete  
NAME HOFFMAN KENNETH P.  
STREET ADDRESS 700 UNIVERSITY BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE AS ☐ Delete  
NAME TANCER EDWARD F  
STREET ADDRESS 700 UNIVERSITY BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE DT ☒ Change ☐ Addition  
NAME SAMIL DILEK L  
STREET ADDRESS 700 UNIVERSE BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE AS ☒ Change ☐ Addition  
NAME COSTANTINO RITA W  
STREET ADDRESS 700 UNIVERSE BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE V ☒ Change ☐ Addition  
NAME SMITH GLENN E.  
STREET ADDRESS 700 UNIVERSE BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE DP ☒ Change ☐ Addition  
NAME YACKIRA MICHEAL W  
STREET ADDRESS 700 UNIVERSE BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE DV ☒ Change ☐ Addition  
NAME HOFFMAN KENNETH P.  
STREET ADDRESS 700 UNIVERSE BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408TITLE S ☒ Change ☐ Addition  
NAME TANCER EDWARD F  
STREET ADDRESS 700 UNIVERSITY BLVD.  
CITY-ST-ZIP JUNO BEACH FL 33408

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: RITA W. COSTANTINO

AS 02/28/2000