FILED Jun 29, 2001 8:00 am

DOCUMENT # P9600084706 1. Entity Name CORNWALL PROPERTIES, INC.				Secretary of State 06-29-2001 90005 044 ***150.00
Principal Place of Business 2844 BANYAN CIRCLE NW BOCA RATON FL 33431		Mailing Address 2844 BANYAN CIRCLE NW BOCA RATON FL 33431		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 1600 Royal Suite, Apt. #, etc.	Pelm Wany	DO NOT WRITE IN THIS SPACE
City & State		City & State	<u> </u>	4. FEI Number 59-3411916 Applied For
Zip	Country	BOCK ICATON, Zip 33432	Country Beach	Not Applicable S8.75 Additional Fee Required Not Applicable
· - · ·	6Name and Address of Current R			7. Name and Address of New Registered Agent
ROSEMURGY, JAMES M 2844 BANYAN CIRCLE NW BOCA RATON FL 33431		•		emuray James M. ss (P.O. Box Normber is Not Acceptable) by Congress of States To Code
8. The above name antity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
SIGNATURE Signature, typed or printing frame of registered agent and title if applicable NOTE: Registered Apent signature required when reinstating) DATE DATE				
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			1 Fee will be \$550.0	State Adda to Pees
11.	OFFICERS AND D	IRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROSEMURGY, JAMES M 2844 BANYAN CIRCLE NW BOCA RATON FL 33431	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition Change Addition Change Addition
TITLE MAME STREET ADDRESS CITY+ST-ZIP	DST ROSEMURGY, DEANNA 2844 BANYAN CIRCLE NW BOCA RATON FL 33431	☐ Delete	TITLE NAME STREET AOORESS CITY-ST-ZIP	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delets	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addillon
13. I hereby of indicated of the cor	Learly that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee emport, or on an attachment with an address, with a decident and the address and	rue and accurate and that my vered to execute this report at	he exemption stated in	n Section 119 07(3)(i), Florida Statutes, I further certify that the information the same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if