2002 UNIFORM BUSINESS REPORT (UBR)

May 02, 2002 8:00 am Secretary of State DOCUMENT # P97000023798 1. Entity Name 05-02-2002 90014 050 ***150 00 SUWANEE PLAZA PROPERTIES, INC. Principal Place of Business Mailing Address 7335 GALL BLVD 7335 GALL BLVD SUITE 2 SUITE 2 ZEPHRYHILLS FL 33541 ZEPYRHILLS FL 33541 2. Principal Place of Business 3. Mailing Address 411 Commercial Court 411 Commercial Court DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Suite E Suite E Applied For City & State City & State 4. FEI Number 65-0733000 Not Applicable Venice, FL Venice, FL Country Country \$8.75 Additional Zio 5. Certificate of Status Desired Fee Required 34292 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BINGHAM, JAMES H Street Address (P.O. Box Number is Not Acceptable) 411 Commercial Court 7335 GALL BLVD SUITE 2 Suite E ZEPHYRHILLS:FL 33541 Venice e purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity s James H. Bingham April 19, 2002 SIGNATURE (NOTE: Registered Agent signature required when reinstating) gistered agent and title if applicable. 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, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition Delete TITLE TITLE PD NAME NAME KURLANDER, ROBERT STREET ADDRESS STREET ADDRESS 1230 LAUREL COURT CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33326 ☐ Addition ☐ Change Delete TITLE TITLE VSD NAME NAME BINGHAM, JAMES H STREET ADDRESS STREET ADDRESS 7930 MANASOTA KEY RD CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD FL 34223 Change ☐ Addition TITLE ☐ Delete TITLE D NAME NAME OAKLEY, THOMAS E STREET ADDRESS STREET ADDRESS 2974 PLANTATION DRIVE CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN FL 33883 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete 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

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

of the corporation or the receiver of trust tempove changed, or on an attachment of a stress of

James H. Bingham

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 of trust empoyed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

April 19, 2002

(941)488-0270

Daytime Phone #

FILED