2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P9700062520 May 08, 2000 8:00 am Secretary of State 1. Entity Name SIGNATURE REALTY GROUP, INC. 05-08-2000 90019 028 ***158.75 Mailing Address Principal Place of Business 1555 PALM BEACH LAKES BLVD., STE. 1100 1555 PALM BEACH LAKES BLVD., STE. 1100 W. PALM BEACH FL 33401-2328 W. PALM BEACH FL 33401 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0770015 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ECCLESTONE, E. LLWYD III Street Address (P.O. Box Number is Not Acceptable) 1555 PALM BEACH LAKES BLVD., STE. 1100 W. PALM BEACH FL 33401 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) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing 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. Change ☐ Addition DPT TITLE ☐ Delete TITLE ECCLESTONE, E. LLYWD III NAME NAME STREET ADDRESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD., STE. 1100 CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33401 ☐ Addition Change ☐ Delete TITLE TITLE NAME COOPER, RON NAME STREET ADDRESS STREET ADDRESS 1555 PALM BCH LAKES BLVD #1100 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BCH FL 33401 Change ☐ Addition Delete TITLE TITLE GANNON, NANNETTE NAME NAME STREET ADDRESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD., STE. 1100 CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33401 ☐ Change ☐ Addition ☐ Delete TITLE TITLE PIRETTI, ROASANNE NAME NAME STREET ADDRESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD., STE. 1100 CITY-ST-ZIP CITY-ST-ZIP W. PALM BEACH FL 33401 ☐ Change Addition TITLE □ Delete TITLE NAME YAHN, WILLIAM D NAME STREET ADDRESS 1555 PALM BCH LAKES BLVD #100 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP WPB FL 33401 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

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 a pother like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

RON COOPER MANUEL NAME OF SIGNING OFFICER OR DIRECTOR

4/11/00

561/686-2000

Date

Daytime Phone #