FILED

Apr 03, 2003 8:00 am Secretary of State

04-03-2003 90151 049 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P97000093012 DOCUMENT

1. Entity Name STREICHER REALTY, INC.



Principal Place of Business Mailing Address 800 W. CYPRESS CREEK RD., STE. 580 800 W. CYPRESS CREEK RD., STE. 580 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0797838 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. 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. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ☐ Addition TITLE ☐ Delete GATHRIGHT, RICHARD E NAME NAME STREET ADDRESS 800 W. CYPRESS CREEK RD., STE. 580 STREET ADDRESS FT. LAUDERDALE FL 33309 CITY-ST-7IP CITY-ST-7IP VTS D **VTS** TITLE Change ☐ Addition Delete TITLE SHORE, MICHAEL S SHORE, MICHAGL S 800 W. CYPRESS CREEK RD. NAME NAME 800 W. CYPRESS CREEK RD., STE. 580 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33309 CITY-ST-782 FT. LAMOERDALE, FL 33309 **X** Delete ⁻ TITLE ☐ Change Addition TITLE BEARD, WENDELL R NAME NAME 800 W. CYPRESS CREEK RD., STE. 580 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33309 CITY-ST-ZIP CITY-ST-ZIP TITLE □ Change TITLE X Delete Addition MURPHY, JOSEPH M NAME NAME 800 W. CYPRESS CREEK RD., STE. 580 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33309 CITY-ST-ZIP CITY-ST-7IP **X** Delete TITLE TITLE ☐ Change ☐ Addition O'CONNOR, C. RODNEY 800 W. CYPRESS CREEK RD., STE. 580 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33309 CITY-ST-ZIP ☐ Delete □ Change ☐ Addition PICOW, ROBERT S NAME NAME 800 W. CYPRESS CREEK RD., STE. 580 STREET ADDRESS STREET ADDRESS CITY-ST-7IP FT. LAUDERDALE FL 33309 CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachmen with an address, with all other like empowered.

SIGNATURE:

SIONATORE REDUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR