FILED 2001 UNIFORM BUSINESS REPORT (UBR) Feb 05, 2001 8:00 am DOCUMENT # **P97000103127 Secretary of State** 1. Entity Name SKYLER MIAMI, INC. 02-05-2001 90087 020 ***158.75 Principal Place of Business Mailing Address 125 WEST ROMANA STREET #400 125 WEST ROMANA STREET #400 711131 ONE PENSACOLA PLAZA ONE PENSACOLA PLAZA PENSACOLA FL 32501 PENSACOLA FL 32501 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3481849 Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAMPBELL, JAMES S Box Number is Not Acceptable **BEGGS & LANE** 3 WEST GARDEN STREET #700 PENSACOLA FL 32501 SIAJAS/US 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, typed or printed na of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS (CHANGES TO DEFICERS AND DIRECTORS IN 11

\$5.00 May Be

Added to Fees

Applied For

Not Applicable

11.	OFFICENS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND BINECTORS IN TI				1 _
TITLE	D	☐ Delete	TITLE	D	☐ Change	Addition	(10/00)
NAME	BELL, SCOTT J		NAME	Williams, Roy C.		•	18
STREET ADDRESS	125 WEST ROMANA STREET #400		STREET ADDRESS	125 W. Romana St. S	سنهو 400)	
CITY-ST-ZIP	PENSACOLA FL 32501		CITY-ST-ZIP	Pensacola FL 3250	·		ΙÄ
TITLE	D	☐ Delete	TITLE		Change	☐ Addition	CR2E034
NAME	FOSTER, DANA R		NAME				
STREET ADDRESS	125 WEST ROMANA STREET #400	,	STREET ADDRESS				l
CITY-ST-ZIP	PENSACOLA FL 32501		CITY-ST-ZIP				l
TITLE	D	☐ Delete	TITLE		☐ Change	☐ Addition	ĺ
NAME	HOLLOWAY, J L		NAME				ı
STREET ADDRESS	125 W. ROMANA ST., STE. 400		STREET ADDRESS				1
CITY-ST-ZIP	PENSACOLA FL 32501		CITY-ST-ZIP				ĺ
TITLE	D	☐ Delete	TITLE		☐ Change	☐ Addition	
NAME	ST. PE', GERALD		NAME				l
STREET ADDRESS	125 W. ROMANA ST., STE. 400		STREET ADDRESS				l
CITY-ST-ZIP	PENSACOLA FL 32501		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE		☐ Change	☐ Addition	ĺ
NAME	TOLAN, JOHN J JR		NAME				ĺ
STREET ADDRESS	125 WEST ROMANA STREET #400		STREET ADDRESS				
CITY-ST-ZIP	PENSACOLA FL 32501		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE		☐ Change	☐ Addition	
NAME	TREHERN, W E		NAME			·	
STREET ADDRESS	125 W. ROMANA ST., STE. 400	l l	STREET ADDRESS				ĺ
CITY-ST-ZIP	PENSACOLA EL 32501		CITY-ST-ZIP				l

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:

OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYP