2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Mar 26, 2007 08:00 AM DOCUMENT # P98000002697 **Secretary of State** 1. Entity Name HGL PROPERTIES G.P., INC. Principal Place of Business Mailing Address **B120 NATIONS WAY** 8120 NATIONS WAY STE 202 STE 202 JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-3494192 Not Applicable Zip Country Country Zιρ \$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 REINSCH, MARK A ESQ Street Address (P.O. Box Number is Not Acceptable) 2700 LAKE SHORE BLVD JACKSONVILLE FL 32210 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, typed or printed name of registered agent and little r applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. HDF ☐ Delete DILE Change SMITH, JAMES P JR U000000680315 NAME NAME 04/03/07-80073-018 150.00 8120 NATIONS WAY STE 202 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32216 CITY-ST-ZIP CITY-ST-7IP TITLE Delete ☐ Change Addition шт NEWTON, RUSSELL B JR NAME NAME 1400 W. FORSYTH STREET., STE 1600 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32202 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NEWTON, RUSSELL B III NAME NAME 1400 W. FORSYTH STREET., STE 1600 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32202 CITY+07 7:7 CITY - ST - ZIP ☐ Delete TITLE ☐ Change ☐ Addition MANN, WILLIAM R NAME NAME 1400 W. FORSYTH STREET., STE 1600 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32202 CITY-ST-ZIP CITY-ST-ZIP THLE Deleie TITLE ☐ Change Addition STOUT, WILLIAM W NAME NAME 8120 NATIONS WAY., STE 202 STREET ADDRESS. STREET ADDRESS JACKSONVILLE FL 32216 CITY-ST-ZIP C(1)Y-S1-7(P TITLE ☐ Delete THILE Change Addltion NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-S1-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes 1 further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an efficer or director of line 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 attachment with an address, with all other like empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF CLORING OFFICER OR DIRECTO

Will Stout 3/19/07 904.296.3444