2001 UNIFORM BUSINESS REPORT (UBR) May 15, 2001 8:00 am Secretary of State DOCUMENT # P98000046020 1. Entity Name 05-15-2001 90191 026 ***150.00 LAMAR AND ASSOCIATES, INC. Principal Place of Business Mailing Address 109 NW 11TH AVE. 109 NW 11TH AVE. DANIA BEACH FL 33004 DANIA BEACH FL 33004 C0066474 2. Principal Place of Business 800 W. OAKLAND PKY, Blue 1.0.130V 1085 DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number 65-0845475 DANIA BEACH Not Applicable Country Brow Avid \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CARROLL, CHARLES C Street Address (P.O. Box Number is Not Acceptable) 2131 PLUNKETT ST HOLLYWOOD FL 33020 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name 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 \$5.00 May Be After MAY 1, 2001 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME CARROLL, MARJORIE T STREET ADDRESS STREET ADDRESS 109 NW 11TH AVE. CITY-ST-ZIP CITY-ST-ZIP **DANIA FL 33004** ☐ Addition ☐ Change TITLE ☐ Delete NAME NAME CARROLL, LEON J STREET ADDRESS STREET ADDRESS 109 NW 11TH AVE. CITY-ST-ZIP CITY-ST-ZIE DANIA FL 33004 ☐ Change Addition ☐ Delete TITLE TITLE DT NAME NAME SIDNEY, DEBORAH L STREET ADDRESS STREET ADDRESS 6511 GRANT ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33024-5839 ☐ Addition TITLE Change TITLE ☐ Delete DS NAME NAME CARROLL, SHARON E STREET ADDRESS STREET ADDRESS 109 NW 11TH AVE CITY-ST-ZIP CITY-ST-ZIP <u>DANIA BEACH FL 33004</u> TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE □ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-7IP