2007 FOR PROFIT CORPORATION

Apr 18, 2007 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # P98000046321** 04-18-2007 90179 038 ***150.00 FIRST COAST SERVICE OPTIONS, INC. 40067680 Principal Place of Business Mailing Address **532 RIVERSIDE AVENUE 532 RIVERSIDE AVE** JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04172007 CR2E034 (12/06) Cha-P City & State City & State 4. FEI Number Applied For 59-3514335 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DIKTER, HARVEY B. Street Address (P.O. Box Number is Not Acceptable) 532 RIVERSIDE AVENUE JACKSONVILLE, FL 32202 City Zip Code FL 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition NAME MCDONALD, DEANNA M. Diana M. Haramboure NAME STREET ADDRESS 4800 DEERWOOD CAMPUS PKWY 100-6 STREET ADDRESS 532 Riverside Avenue 20T CITY-ST-ZIP JACKSONVILLE, FL 32246 Jacksonville, FL 32202 CITY-ST-ZIP D TITLE ☐ Delete TITLE Addition ☐ Change HARDY, DORCAS R NAME NAME John E. Frantz STREET ADDRESS 11407 STONEWALL JACKSON DRIVE STREET ADDRESS 532 Riverside Avenue 3H CITY-ST-ZIP SPOTSYLVANIA, VA 22553 CITY-ST-7IP Jacksonville, FL 32202 D Addition TITLE ☐ Delete TITLE ☐ Change MARVIN, GUY NAME NAME Jorge A. Gomez 1430 E.PIEDMONT DRIVE STREET ADDRESS STREET ADDRESS 532 Riverside Avenue 20T CITY-ST-ZIP TALLAHASSEE, FL 32312 CITY-ST-ZIP Jacksonville, FL 32202 TITLE Delete TITLE ☐ Change ☐ Addition THOMPSON, BYRON, JR. NAME NAME STREET ADDRESS 1200 SAN AMARO ROAD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32207 CITY-ST-ZIP TITLE CD ☐ Delete TITLE ☐ Change ☐ Addition NAME GRANTHAM, LESTER J NAME STREET ADDRESS 4800 DEERWOOD CAMPUS PKWY 100-8 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32246 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 trusted 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

LORD, CURTIS W.

532 RIVERSIDE AVENUE

JACKSONVILLE, FL 32202

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Harvey B. Dikter RE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

April 17, 2007

(904) 791-8760

☐ Change

■ Addition

FILED

ATTACHMENT

40067680 #P980004632i

10. Continued

P, COO Sandra L. Coston 532 Riverside Avenue 20T Jacksonville, FL 32202

V, S, General Counsel Harvey B. Dikter 532 Riverside Avenue 20T Jacksonville, FL 32202

V, T, CFO Michael Davis 532 Riverside Avenue 20T Jacksonville, FL 32202

V Frank L. James 532 Riverside Avenue 20T Jacksonville, FL 32202

V Patricia M. Ainsley 532 Riverside Avenue 20T Jacksonville, FL 32202

V Robert L. Malinky 532 Riverside Avenue 1T Jacksonville, FL 32202

V Mary K. Andrysiak 532 Riverside Avenue 1T Jacksonville, FL 32202