2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000097711 Apr 10, 2000 8:00 am Secretary of State ZP NO. 80 MEMBER, INC. 04-10-2000 90113 026 ***158.75 Mailing Address Principal Place of Business 111 Princess Street Post Office Box 2628 Wilmington, NC 28401 Wilmington, NC 28402 80057125 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 56-2111920 Not Applicable Zip Country 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 CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Plantation, FL 33324 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) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOWILL FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS ☐ Addition Change ☐ Delete P/D TITLE Jeffrey L. Zimmer NAME STREET ADDRESS STREET ADDRESS 111 Princess Street Wilmington, North Carolina 28401 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change VP/T/D □ Delete TITLE TITLE Alan M. Zimmer NAME STREET ADDRESS STREET ADDRESS 111 Princess Street CITY-ST-ZIP Wilmington, North Carolina CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME Herbert J. Zimmer STREET ADDRESS STREET ADDRESS 111 Princess Street CITY-ST-ZIP Wilmington, North Carolina 28401 CITY-ST-ZIP Change Addition ☐ Delete TITLE E. Bruce Moskowitz NAME 2107 Ascott Place STREET ADDRESS STREET ADDRESS Wilmington, North Carolina 28403 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITI E ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ZIMMER. Secretary

SIGNATURE: _

CR2E034 (9/99)

03/29/00

910/763-4669

Daytime Phone #