FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 26, 2002 8:00 am Secretary of State DOCUMENT # P98000107517 1. Entity Name BERKLEY-GILMER, INC. 04-26-2002 90014 007 ***150.00 Principal Place of Business Mailing Address 440 SO. FEDERAL HWY, #105 440 SO. FEDERAL HWY. #105 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 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 Applied For 65-0884550 Zip Not Applicable Zip Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DEBORAH A. ROTH, P.A. Street Address (P.O. Box Number is Not Acceptable) 21301 POWERLINE ROAD **SUITE 310 BOCA RATON FL 33433** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete VICE PRESIDENT TITLE Change NAME BERKLEY, RONALD S ☐ Addition BERKIEY ROMALDS. NAME STREET ADDRESS 6372 LACOSTA DR. STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP CITY-ST-ZIP BOYNTON BEACH, FL 33437 TITLE PRESIDENT Addition GILMER, JOHN L ICAN BERMLEY NAME STREET ADDRESS 440 SO. FEDERAL HWY. #105 928 SEASHELL TERR. STREET ADDRESS CITY-ST-ZIP **DEERFIELD BEACH FL 33441** BOYNTON BENCH, FL 33437 CITY-ST-ZIP TITLE - Delete TITLE NAME Change Addition 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

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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