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DOCUMENT # P9900001160 FILED Jan 12, 2001 8:00 am DICK HILL PUTTING, INC. Secretary of State 01-12-2001 90014 006 ***150.00 Principal Place of Business Mailing Address 2000 LAKECHORE-DRIVE 9000-LAKESHORE-DRIVE DEERFIELD BEACH FL 8844 DEERFIELD REACH EL 33442 2. Principal Place of Business 3. Mailing Address 4080 QVAIL 4080 QUAIL RIAGE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE APT APT Applied For City & State City & State 4. FEI Number 65-0897297 Not Applicable OYNTON \$8.75 Additional 5. Certificate of Status Desired USA 33436 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RICHARD HILL, RICHARD S Street Address (P.O. Box Number is Not 4080 QUAIL IZ -3000-LAKESHORE DRIVE-QUAIL DEERFIELD BEACH FL 33442 BEACH 30YNTON 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 LICHARA 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 12. 11. PTD PTD TITLE Change Addition ☐ Delete TITLE HILL RICHARD S: HILL, RICHARD S NAME 4080A QUAIL RIDGE DR STREET ADDRESS STREET ADDRESS 3000 LAKESHORE DRIVE CITY-ST-ZIP CITY-ST-ZIP BOYNTON BEACH, FL 33436 DEERFIELD BEACH FL 33442 ☐ Addition TITLE ☐ Change **VPSD** Delete TITLE ORNITZ, ROBERT A NAME NAME STREET ADDRESS 4503 LIVE OAK BLVD. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DELRAY BEACH FL ☐ Change ☐ Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ 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.

GNATURE: RICHARD S. IAILE