2602 UNIFORM BUSINESS REPORT (UBR) P99000032330 DOCUMENT # FILED 1. Entity Name JOB CO-OP, INC. 02 JUN 14 AM 10: 05 Principal Place of Business Mailing Address SECRETARY OF STATE TALLAHASSEE, FLORIDA 631 N WYMORE ROAD 631 N WYMORE ROAD SUITE 200 SUITE 200 MAITLAND FL 32751 MAITLAND FL 32751 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3582878 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RYLACKI, AJCK -- TACK ZYBICKI Street Address (P.O. Box Number is Not Acceptable) 631 N WYMORE ROAD SUITE 200 MAITLAND FL 32751 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 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 12. 11. Delete ☐ Change TITLE TITLE Su six additions COGAN. CHRISTOPHER G NAME NAME an schedule attached STREET ADDRESS 631 N WYMORE ROAD SUITE 200 STREET ADDRESS CITY-ST-ZIP MAITLAND FL 32751 CITY-ST-ZIP GOS Change ☐ Addition TITLE BM ☐ Delete TITLE FREY, DALE NAME NAME STREET ADDRESS 631 N WYMORE ROAD SUITE 200 STREET ADDRESS 300005980673---4 MAITLAND FL 32751 CITY-ST-ZIP CITY-ST-ZIP -06/25/02--01@75amge 025 Addition TITLE ☐ Delete TITLE BM ***1200.00 ****150.00 NAME NAME RYAN, JOE 631 N WYMORE ROAD SUITE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAITLAND FL 32751 ☐ Delete TITLE Change ☐ Addition TITLE CAULO, RALPH NAME NAME STREET ADDRESS STREET ADDRESS 631 N WYMORE ROAD SUITE 200 CITY-ST-7IP CITY-ST-7IP MAITLAND FL 32751 Delete Change Addition TITLE TITLE NAME NAME ROSEN, FRED STREET ADDRESS STREET ADDRESS 631 N WYMORE ROAD SUITE 200 CITY-ST-ZIP CITY-ST-ZIP MAITLAND FL 32751 Prosident, CEO & BM ☐ Addition TITLE BM ☐ Delete TITLE NAME DRESNER, DAVE NAME 631 N WYMORE ROAD SUITE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAITLAND FL 32751 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.

407-691.5000 Davtime Phone # Co-op, Inc. and Subsidiaries

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Name	Title	Status
Directors: (*)		**************************************
Dale Frey	Chairman of the Board	SAME
		SAME
Joe Ryan Raíph Caulo	Board Member Board Member	SAME
Sızy Go'dberger	Board Member	ADDITION HOITIDDA
Rick Kelleher Dave Dresner	Board Member Board Member	SAMS
Brian Weed	Board Member	MOITIDAA
Officers:		02415
Dave Dresner Bill Johnston	President & Chief Executive Officer Executive Vice President Corporate Development & Marketing	SUCHA OBTON
řack Rybicki	Senior Vice President & Chief Financial Officer	ADDITION
Charles Fountain	Senior Vice President & Chief Information Officer	MOTTIGEA

* All officers/ Directors are located at the corporate address