FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 11, 2002 8:00 am Secretary of State

| DOCUN 1. Entity Name | MENT # \$\overline{P}\)9000058 | 493 | | | 04-11-2002 | 2 90765 001 | *4,050. | .00 |
|--|---|--|---|---------------------------|---|--|--|--|
| ESI I | MONTGOMERY COUNTY G | P, INC. | \ \ | | | | | |
| | O NOT WRITE | IN THIS S | PACE | | | - | 76 | 742 |
| | 2 pb 1 2 2 | | | Pr. | | | | |
| 2. Principal Pla 700 Un | ce of Business Liverse Blvd. | 3. Mailing Address 700 Universe Blvd. | | | | | | |
| Suite. Apt. # | , etc. | Suite, Apr. #. etc. c/o Rita W. Costantino | | | DO NOT WRITE IN THIS SPACE | | | |
| City & State Juno Bch, FL | | City & State Juno Bch, FL | | | 4. FEI Number 65-0943 | 208 | | Applied For Not Applicable |
| Ziρ 33408 | Country | ^{Zip} 33408 | Country | | 5. Certificate of Status D | Desired | | 5 Additional lequired |
| 4 4 G C C C C C C C C C C C C C C C C C | | | Nan | 30 | 7. Name and Address of | Current Registe | ered Agen | ıt |
| | DO NOT W | RITE | | J. E | Leon P.O. Box Number is Not Ad | ceptable) | | |
| | IN THIS SP | ACE | | 9250 | P.O. Box Number is Not Ac West Flagler | St. | | |
| 1 | | | City | Miam | | | FL Z | 33174 |
| 8 The above t | named entity submits this statement for | the purpose of changing its | s registered offic | | | | | |
| SIGNATURE | ognature, typed or printed name of registered agent a | · | IE: Registered Agent | | |)ACI | ME | |
| | ation is eligible to satisfy its Intangible equirement and elects to do so. | After May | May 1 Fee is / 1 Fee is \$55 ed UBR is \$61 ble to Departr | 0.00 ,25 | 10. Election Cam Trust Fund C | | | \$5.00 May Be Added to Fees |
| 11. | OFFICERS AND | DIRECTORS | College College | * 17 83 | | | 4 (4) | |
| NAME STREET ADDRESS CITY-ST-ZIP | SEE ATTACHED LIST | <u> </u> | TITLE NAME STREET ADDR CITY ST 219 | ESS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | TITLE NAME STREET ADDR | A 400 3 | | | | |
| TITLE NAME STREET ADDRESS | - | | TITLE NAME STREET ADOL | | DO N | OT W | RITE | |
| CITY-SI-ZIP | | | OTY ST. ZIP | | | IIS SP | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | NAME STREET ADOI CITY-ST: 21P | 16 a 411 | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | NAME STREET ADDI CLITY-ST-ZIP | The late of the second of | | | | |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | | | TITLE NAME STREET ADDI CITY-ST-ZIF | | | | | |
| | ertify that the information supplied with on this report or supplemental report is | n this filing does not qualify to strue and accurate and that | 192 | 19 110: 12 12 12 12 | ection 119.07(3)(i), Florida same legal effect as if ma | Statutes, I furthe de under oath; the | er centify the hat I am an opears in B | at the information officer or director block 11 or on an |

| SI | G | N | A. | Tl | JF | RE: |
|----|---|---|----|----|----|-----|
| | | | | | | |

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
W. Costantino, Assistant Secretary

3/28/2002

561-691-7267

Daysine Phone 4

ATTACHMENT TO FLORIDA UNIFORM BUSINESS REPORT (UBR)

ESI MONTGOMERY COUNTY GP, INC.

DOCUMENT P99000058493

Title:

DP

Name:

Green, Ronald F.

Address: City, St., Zip 700 Universe Blvd. Juno Beach, Fl 33469

Title:

DV

Name:

Leighton, Michael L.

Address:

700 Universe Blvd.

City, St., Zip

Juno Beach, FL 33408

Title:

DT

Name:

McGrath, Robert L. 700 Universe Blvd.

Address: City, St., Zip

Juno Beach, FL 33408

Title:

V

Name: Address: O'Sullivan, Michael 700 Universe Blvd.

City, St., Zip

Juno Beach, FL 33408

Title:

S

Name:

Tancer, Edward

Address:

700 Universe Blvd.

City, St., Zip

Juno Beach, FL 33408

Title:

AS

Name:

Costantino, Rita W.

Address:

700 Universe Blvd.

City, St., Zip

Juno Beach, FL 33408