2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 18, 2001 8:00 am Secretary of State DOCUMENT # P99000090045 05-18-2001 91583 044 ***150.00 1171 SOUTH LANE CORPORATION Principal Place of Business Mailing Address 4311 W. WATERS AVE. STE. 402 4311 W. WATERS AVE. STE. 402 TAMPA FL 33614 TAMPA FL 33614 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Country \$8.75 Additional Zip Country Zin 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HABER, RICHARD M Street Address (P.O. Box Number is Not Acceptable) 1311 N CHURCH AVE TAMPA FL 33607 Zip Code City 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) 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. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition TITLE Change TITLE Delete WATKINS; DAVID B NAME NAME STREET ADDRESS STREET ADDRESS 4311 W. WATERS AVE. STE: 402 CITY-ST-ZIP CITY-ST-ZIP TAMPA-FL-33814 Change ☐ Addition Delete TITLE TITLE NAME WILLIAMS, JOSEPH M NAME STREET ADDRESS 1501 2ND AVE EAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33605** Change Addition ☐ Delete TITLE TITLE NAME WILLIAMS, FRANCIS M NAME STREET ADDRESS STREET ADDRESS 1501 2ND AVE EAST CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33605** Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME 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 trusted 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 arr address, with all other like empowered.

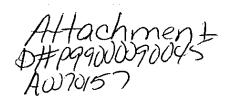
CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR





May 14, 2001

Division of Corporations Uniform Business Report Filings P. O. Box 1500 Tallahassee, FL 32302-1500

Re: 1171 South Lane Corporation, LTD #P99000090045

Dear Sir or Madame:

Enclosed you will find my Uniform Business Report and Fee. I have not included the late fee penalty.

The person who usually handled all the various tax-related reports is no longer here, and the job has been turned over to me. As you can probably tell, I am still learning and did not even realize these business reports had to be filed.

My continued employment will likely depend on whether or not I have to pay an additional fee for not filing by the 1st of May.

I would appreciate any leniency you could afford to me at this time.

Thank you for your time and consideration.

Sincerely.

Cindy Cammarota

Cumberland Property Management