2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # \$23729** May 19, 2000 8:00 am Secretary of State 1. Entity Name RWI. INC. 05-19-2000 90052 018 ***150.00 Principal Place of Business Mailing Address 100 LINCOLN AVENUE P. O. BOX 3010 WINTER PARK FL 32790-3010 WINTER PARK FL 32789 3. Mailing Address 2. Principal Place of Business 250 Park Ave. Suite, Apt. #, etc. Suite 630 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-304 1807 Winter Park, FL Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 32789 Orange 7._Name and Address of New Registered Agent ---6, Name and Address of Current Registered Agent. BATTAGLIA, W.P. Street Address (P.O. Box Number is Not Acceptable) 1007 TEMPLE GROVE <u>250 Park Ave.</u> WINTER PARK FL 32789 Suite 630 Zip Code Winter Park, 32789 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. R.E. Battaglia 4/28/2000 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, 2000 Fee will be \$550.00 \Box 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. Change ☐ Addition TITLE Delete TITLE BATTAGLIA, R.E. NAME NAME 100 LINCOLN AVENUE STREET ADDRESS STREET ADDRESS 250 Park Ave., Suite 630 CITY-ST-ZIP WINTER PARK FL 32789 CITY-ST-7IP Winter Park, FL 32789 🔀 Change Addition TITLE ☐ Delete VP, S, T TITLE BATTAGLIA, W.P. NAME NAME 1007 TEMPLE GROVE STREET ADDRESS STREET ADDRESS 250 Park Ave., Suite 630 CITY-ST-ZIP CITY-ST-7IE WINTER PARK FL Winter Park, FL 32789 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME Butts, A.B. STREET ADDRESS STREET ADDRESS 250 Park Ave., Suite 630 CITY-ST-ZIP CITY-ST-ZIP Winter Park, FL 32789 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS 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.

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R.E. Battaqlia

4/28/2000

407-622-1700

Davtime Phone #