2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 08, 2002 8:00 am Secretary of State S56536 DOCUMENT # 1. Entity Name 05-08-2002 90099 018 ***150.00 LAUDERDALE LAND COMPANY, INC. Principal Place of Business Mailing Address 3250 MARY STREET 3250 MARY STREET SUITE 500 SUITE 500 MIAMI FL 33133 MIAMI FL 33133 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0289875 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEISER, SHERWOOD M. Street Address (P.O. Box Number is Not Acceptable) 3250 MARY STREET **STE 500 COCONUT GROVE FL 33133** City Zip Code 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) DATE 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/01) ☐ Change ☐ Addition WEISER, SHERWOOD M. NAME NAME 3250 MARY ST., S-500 STREET ADDRESS STREET ADDRESS **MIAMI FL 33133** CITY-ST-ZIP CITY-ST-ZIP **DPAS** ☐ Delete TITLE ☐ Change ☐ Addition LEFTON, DONALD E. NAME NAME STREET ADDRESS 3250 MARY ST., S-500 STREET ADDRESS **MIAMI FL 33133** CITY-ST-ZIP CITY-ST-7/P VAS TITLE ☐ Delete TITLE ☐ Change Addition HEWITT, THOMAS F. NAME NAME STREET ADDRESS 3250 MARY ST., S-500 STREET ADDRESS **MIAMI FL 33133** CITY-ST-ZIP CITY-ST-ZIP VAS TITLE ☐ Delete TITLE ☐ Change ☐ Addition SIBLEY, PETER L. NAME NAME 3250 MARY ST., S-500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33133** CITY-ST-ZIP VST TITLE ☐ Delete TITLE ☐ Change ☐ Addition TEMLING, W. PETER NAME NAME 3250 MARY ST., S-500 STREET ADDRESS STREET ADDRESS CITY-ST-7(P **MIAMI FL 33133** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 trusts of impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

OR DIRECTOR

CITY-ST-7IP

SIGNATURE:

CITY-ST-ZIP