2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # V02289** Feb 20, 2000 8:00 am 1. Entity Name **Secretary of State** GLICKSTEIN, LAVAL, CARRIS, LEVITT, LOOMIS & DANT 02-20-2000 90053 030 ***150.00 Principal Place of Business Mailing Address 2100 LEE ROAD 2100 LEE ROAD SHITE A SUITE A WINTER PARK FL 32789-1862 WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3094260 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GLICKSTEIN, MARTIN R. Street Address (P.O. Box Number is Not Acceptable) 2100 LEE ROAD SUITE A WINTER PARK FL 32789 Zip Code 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) DATE 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 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. PD ☐ Addition ☐ Delete TITLE TITLE LAVAL, RODNEY S. NAME NAME STREET ADDRESS 2100 LEE ROAD, SUITE A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL ☐ Change ☐ Addition ☐ Delete TITLE GLICKSTEIN, MARTIN R NAME NAME STREET ADDRESS STREET ADDRESS 2100 LEE ROAD, SUITE A CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 ☐ Addition ☐ Delete TITLE ☐ Change CARRIS, W. NEAL NAME STREET ADDRESS STREET ADDRESS 2100 LEE ROAD, SUITE A CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME DANTUMA, MARY NAME 2100 LEE ROAD, SUITE A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL Change ☐ Addition ☐ Delete TITLE TITLE LEVITT, HARVEY N NAME STREET ADDRESS STREET ADDRESS 2100 LEE ROAD, SUITE A CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL ☐ Delete Change ☐ Addition TITLE TITLE LOOMIS, JAMES M. NAME NAME STREET ADDRESS STREET ADDRESS 2100 LEE ROAD, STE A CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL

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.

407-645-4775

Daytime Phone 8

Bunn Neal Carris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE