FILED 2000 UNIFORM BUSINESS REPORT (UBR) Jan 28, 2000 8:00 am **DOCUMENT # V08187 Secretary of State** ্ৰ. Entity Name CARDINAL REALTY CORPORATION OF PALM BEACH 01-28-2000 90037 001 ***317.50 Principal Place of Business Mailing Address 217 PERUVIAN AVENUE 217 PERUVIAN AVENUE MAR 1008 PALM BEACH FL 33480-4635 PALM BEACH FL 33480 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0308979 Not Applicable Zip \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7." Name and Address of New Registered Agent BEALL, KEN-ESQ. GUNSTER, YOAKLEY & STEWARD WEST PALM BEACH FL 33401 iging its registered office or registered agent, or both, in the State of Florida 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. Change ☐ Addition CCEO ☐ Delete TITLE TITLE GUNDLACH, HEINZ L NAME NAME STREET ADDRESS STREET ADDRESS 217 PERUVIAN AVE CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL Change ☐ Addition ☐ Delete TITLE **GUNDLACH, CORNELIA T** NAME NAME 217 PERUVIAN AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL \$158,75 ☐ Delete TITLE ---TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 in Block 12

RE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

(66/6)

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