2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 26, 2002 8:00 am Secretary of State DOCUMENT # V58902 1. Entity Name TERRACE REALTY CORPORATION 02-26-2002 90128 022 ***150.00 Principal Place of Business Mailing Address 5400 OCEAN BLVD 5400 OCEAN BLVD B0031830 SIESTA KEY FL 34242 SIESTA KEY FL 34242 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 65-0353562 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7...Name and Address of New Registered Agent GIROTTO, JOHN Street Address (P.O. Box Number is Not Acceptable) 5400 OCEAN BLVD SARASOTA FL 34242 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Addition Delete NAME CLAPP, CHARLES NAME STREET ADDRESS 2555 PENNYSLVANIA AVE NW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STOKE, JUDY L 2827 GRAND CAYMANSE SARASOTA FL. 34231 STREET ADDRESS STREET ADDRESS 225 HERONS RUN DR. #606 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34232 ☐ Delete TITLE THEFT Change ☐ Addition NAME NAME GIROTTO, JOHN STREET ADDRESS STREET ADDRESS 5400 OCEAN BLVD. #7-3 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34242 TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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 adoptemental 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 receive or trustee empowered be 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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP