SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1995 AUG -3 AM 9: 18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V73300 (8)

1. Corporation Name

COLLAGE SOUTHEAST, INC.

Principal Place of Business	Mailing Address
1150 LOUISIANA AVENUE SUITE 6 WINTER PARK FL 32789	1150 LOUISIANA AVENUE SUITE 6 WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE.

Eff. Aug 4/95

2. Principal Place of Business: 21 585 Technology Park	2a. Mailing Address: 26 Same as #2
Suite, Apt. #, etc.: 22 100	Suite, Apt. #, etc.: 27
City & State: 23 Lake Mary, Florida	City & State: 28 U.S.A.
Zip: 24 32746 — Country: 25 U.S.A.	Zip: 29 — Country: 30

3. Date Incorporated or Qualified: 10/19/1992
3a. Date of Last Report: 08/15/1994
4. FEI Number: 59-3150100 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WALSH, BRIAN
1150 LOUISIANA AVENUE
SUITE 6
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name: WALSH, BRIAN
82 Street Address (P.O. Box Number is Not Acceptable): 585 Technology Park, Suite 100 — EFF AUG 4, 1995
83
84 City: Lake Mary FL 85 Zip Code: 32746

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Brian Walsh - President — 7.28.95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	WALSH, BRIAN	1.2 NAME	
STREET ADDRESS	1150 LOUISIANA AVE #6	1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: BRIAN A. WALSH - President — 7.28.95 — (407) 628-8776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000000 CP