FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 18, 2001 8:00 am Secretary of State **DOCÚMENT # 765617** 1. Entity Name 07-18-2001 90002 015 ****61.25 CLAN ROSS ASSOCIATION OF THE UNITED STATES, INC. Mailing Address Principal Place of Business A U U I U U II U P.O. BOX 472 P.O. BOX 472 PEVELY MO 63070 PEVELY MO 63070 2. Principal Place of Business 3. Mailing Address 18946 18946 Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2369997 Co Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 80403 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) ROSS, LAWERENCE F 205 REDWING COURT CASSELBERRY FL 32707 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Treasurer TITLE TITL F □ Change **∠**-Addition Delete CATHY STATEN NAME ANDREWS, HAROLD NAME 18946 W. 59 MDr-STREET ADDRESS 2071 W STR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GoldEN, eo 80403 **UKIAH CA 95482** TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROSS, DOUGLAS P NAME STREET ADDRESS 10300 NUGGET PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STANFIELD NC 28163 MS----☐ Addition TITLE - So -- S Delete -TITI C ☐ Change ROSS, MARILYN NAME NAME STREET ADDRESS STREET ADDRESS 5430 S. 5TH ST CITY-ST-ZIP **ARLINGTON VA 22204** CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME ROSS, SHIRLEY NAME STREET ADDRESS 235 S JEFFERSON STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GALION OH 44833 TITLE ☐ Delete TITLE ☐ Change Addition O'BRIEN, DOROTHY NAME NAME STREET ADDRESS 13245 HWY CC STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FESTUS MO 63028 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROSS, HARDIN STREET ADDRESS 676 JUNALUSKA RD. STREET ADDRESS CITY-ST-7IP ANDREWS NC 28901 CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

720-931-7544