3. 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

124 02 (019) 876-366

Addition

Change

CR2E034 (4/02)



8970 Southall Road • Raleigh, North Carolina 27616

Phone: (919) 876-3667 • Fax: (919) 872-9666 • Website: www.tompkinsinc.com

July 24, 2002

Ms. Katherine Harris Secretary of State Florida Department of State **Division of Corporations Uniform Business Report Filings** P. O. Box 1500 Tallahassee, FL 32302-1500

Dear Ms. Harris:

We ask your favorable consideration in waiving the \$400.00 late filing penalty since we did not receive the notice prior to the May 1st deadline. We have moved our offices and even though mail is forwarded, it is not always timely.

Thank you for your consideration in this matter.

Sincerely,

Jerry D. Smith

Executive Vice President

Enclosures - 2