2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # L75618 Sep 12, 2000 8:00 am 1. Entity Name Secretary of State OCENA, INC. 09-12-2000 90002 007 ***550.00 Principal Place of Business Mailing Address 400 S GREENWOOD AVENUE 400 S GREENWOOD AVENUE CLEARWATER FL 33756-5719 CLEARWATER FL 34616 3. Mailing Address 2. Principal Place of Business 355-B Lynnfield 355-B Lynnfield DO NOT WRITE IN THIS SPACE Suite 245 Applied For City & State 4. FEI Number City & State 59-3009918 Not Applicable Memphis Country \$8.75 Additional Country 5. Certificate of Status Desired USA Fee Required 811 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD PLANTATION FL 33324 Zip Code 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 DATE a Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME **NELSON, HORACE** STREET ADDRESS STREET ADDRESS 1355-B LYNNFIELD RD, STE 245 CITY-ST-ZIP CITY-ST-ZIP MEMPHIS TN 38119 President and Director Change Addition TITLE ☐ Delete TITLE NAME NAME PRUDE, I.B. STREET ADDRESS STREET ADDRESS 1355-B LYNNFIELD RD. STE 245 CITY-ST-ZIP CITY-ST-ZIP MEMPHIS TN 38119 Director ☐ Change Addition TITLE Delete TITLE Dorman Blaine 120 Market Place Blod NAME NAME TAYLOR, R. K. STREET ADDRESS 400 S GREENWOOD AVE. STREET ADDRESS Knoxville TN 37922 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL Addition Director ☐ Change 7171 8 Delete TITLE mickey Holliman 4452 Lakewood NAME NAME MEDLIN, B. J. STREET ADDRESS STREET ADDRESS 400 S GREENWOOD AVE. Belden Ms 38826 CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL** Director ☐ Change **▼** Addition 👿 Delete TITLE TITLE Jack Hatcher MLADIC, WILLIAM G. NAME zzo midland Road STREET ADDRESS STREET ADDRESS 400 S GREENWOOD AVENUE 28374 CITY-ST-ZIP Pinehurst NC CITY-ST-ZIP CLEARWATER F. Secretary Treasurer **X** Addition ☐ Change TITLE Delete TITLE Brandon Wethrich CHU. TIN S NAME 8409 Swethmore Court STREET ADDRESS STREET ADDRESS 4629 36TH ST, STE 200 knoxrille TN 37919 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32811 13. I hereby certify that the information supplied with this filling does not quality 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 empoyered.