2002 UNIFORM BUSINESS REPORT (UBR)

FILED Sep 11, 2002 8:00 am Secretary of State DOCUMENT # N95000004656 1. Entity Name 09-11-2002 90126 015 ****61.25 MAIN STREET WAUCHULA, INC. Principal Place of Business Mailing Address 979736 411 W ORANGE ST P.O. BOX 1162 WAUCHULA FL 33873 WAUCHULA FL 33873 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 65-0625907 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BURTON, JOHN W. H ESQ. 501 W. MAIN STREET WAUCHULA FL 33873 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE After September 13, 2002, 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be min. will be \$236.25. Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. S/D TO change TITLE TITLE Delete ☐ Addition Millie Bolin NAME **BOLIN, MILLIE C** NAME 525 DANSBY RD Jeraldine Crews STREET ADDRESS STREET ADDRESS 525 BANSBY RD CITY-ST-ZIP CITY-ST-ZIP WAUCHULA FL 33873 TITLE ☐ Delete TITLE Addition CREWS, JERALDINE NAME NAME PO BOX - 248-STREET ADDRESS STREET ADDRESS GRIFFEN ROAD CITY-ST-ZIP CITY-ST-7IP WAUCHULA FL 33873 DIRECTOR Barter, Tracy TITLE VP/D ☐ Delete TITLE Addition NAME BAXTER, TRACY T NAME STREET ADDRESS STREET ADDRESS 703 HONOLULU DR CITY-ST-7IF CITY-ST-ZIP Wauchula FL 33873 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME CARLTON, DEBBIE NAME STREET ADDRESS 2587 W MAIN ST STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP WAUCHULA FL 33873 Carty Walker 4162 W Main St Addition TITI F Delete TITLE ☐ Change JONES, MARY NAME STREET ADDRESS STREET ADDRESS 568 POPASH RD Wauchula, Fr 33873 CITY-ST-ZIP CITY-ST-ZIP WAUCHULA FL 33873 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

12. I hereby certify that the information supplied with this filling 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 artachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP