FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 24, 2002 8:00 am Secretary of State DOCUMENT # P20727 1. Entity Name LANE/BISHOP/YORK/DELAHAY, INC. 04-24-2002 90392 005 \*\*\*158.75 Principal Place of Business Mailing Address 716 SOUTH 30TH STREET 716 SOUTH 30TH STREET agerer **BIRMINGHAM AL 35233** BIRMINGHAM AL 35233 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 - 63-0752450 Not Applicable Zip Country 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 HINTON, ANDREW C. (850) 453 3241 Street Address (P.O. Box Number is Not Acceptable) 627 NEW WARRINGTON ROAD PENSACOLA FL 32506 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. Andrew C. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition **BISHOP, EDWIN GLENN** NAME NAME STREET ADDRESS 716 SOUTH 30TH STREET STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP TITLE VSD ☐ Delete TITLE Change ☐ Addition NAME YORK, D. DALE NAME STREET ADDRESS 716 SOUTH 30TH STREET STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition DELAHAY, JAMES M. NAME NAME STREET ADDRESS 716 SOUTH 30TH STREET STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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

SIGNATURE:

D. Dale York SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

Date

(205) 251-4500

Daytime Phone #