FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 28, 2002 8:00 am **Secretary of State** DOCUMENT # V14912 1. Entity Name 02-28-2002 90082 001 ***300.00 VOLUME & VELOCITY, INC. Principal Place of Business Mailing Address 3681 N W 7TH STREET 3681 NE 7TH STREET OCALA FL 34470 OCALA FL 34470 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3106877 Not Applicable Zip Country Country _ Zip _ \$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 USHER, JOHN 1091 S-W-79RD STREET RD OCALA-FL-34476 8. The above named statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. d 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 \$5.00 May Be Tax filing requirement and elects to do so. 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Delete CR2E034 (9/01) TITLE TITLE ☐ Addition NAME USHER, JOHN STREET ADDRESS STREET ADDRESS 1091 SW 73RD STREET RD. CITY-ST-ZIP OCALA FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME USHER, DEBORAH L STREET ADDRESS STREET ADDRESS 3681 NE 7TH ST CITY-ST-ZIP CITY-ST-ZIP OCALA FL 34470 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in Block

SIGNATURE:

changed, or on an attachment v