2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 22, 2000 8:00 am Secretary of State DOCUMENT # S96273 1. Entity Name COACH HOUSE INC. 08-22-2000 90236 018 ***150.00 Mailing Address Principal Place of Business 3480 Technology Drive 3480 Technology Drive Nokomis, FL 34275 Nökomis, FL 34275 A0074023 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0301709 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Steven B. Gerzeny Street Address (P.O. Box Number is Not Acceptable) 3480 Technology Drive Nokomis, FL 34275 Zip Code fomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity § Steven B. Gerzeny 8/15/00 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing. \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS CR2E034 (9/99) Director Addition TITLE ☐ Delete TITLE David R. Gerzeny NAME NAME STREET ADDRESS STREET ADDRESS 4230 Castlebridge Lane CITY-ST-ZIP CITY-ST-ZIP Sarasota, FL 34238 ☐ Addition Change Director ☐ Delete TITLE NAME Steven B. Gerzeny STREET ADDRESS 440 Bayshore Drive Venice, FL 34285 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Director TITLE [Addition ☐ Delete TITLE NAME Matthew L. Gerzeny NAME STREET ADDRESS 433 Lake of the Woods Drive STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Venice, FL 34293 Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 13. 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 truebe 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, min all other like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

August 15, 2000

Division of Corporations
2000 Uniform Business Report
P. O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find check number 22024 in the amount of \$150.00. Please waive the penalty; Coach House Inc. did not receive the first or second notice for the 2000 Uniform Business Report. Thank you for your cooperation.

Respectfully,

Vicky Layden Office Manager