E034 (9/01)

· 2002 Uniform Business Report (UBR)

Apr 10, 2002 8:00 am 003860 DOCUMENT # **Secretary of State** 1. Entity Name THE MONTICELLO COMPANIES, INC. 04-10-2002 90679 001 ***450 00 Principal Place of Business Mailing Address 1604 STOCKTON STREET 1604 STOCKTON STREET JACKSONVILLE FL 32204 JACKSONVILLE FL 32204 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 59-0366140 Not Applicable Ziρ 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 ≈roberts::William:r>= Street Address (P.O. Box Number is Not Acceptable) 1604 STOCKTON STREET JACKSONVILLE FL 32204 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. Signature, typed or printed name of registered agent and title if applicable 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Addition DEAN, HENRY E III NAME NAME 1604 STOCKTON STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32204 CITY-ST-ZIP VP D TITLE ☐ Delete TITLE Change ☐ Addition DEAN, THOMAS D.S. NAME NAME STREET ADDRESS 1604 STOCKTON STREET STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32204 CITY-ST-7IP TITLE. Delete TITLE ▼ Change ☐ Addition **CUMMINS, ELOISE** NAME CHMMINS, ELDISE-1604 STOCKTON ST. NAME STREET ADDRESS 1604 STOCKTON STREET STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32204 CITY-ST-ZIP 32204 ACKSONVILLE TITLE TITLE T. D. ☐ Addition ☐ Delete Change : ROBERTS, WILLIAM R ROBERTS, WILLIAM NAME STREET ADDRESS 711 NORTH OAK STREET STREET ADDRESS 1604 STOCKTON ST. CITY-ST-ZIP VALDOSTA GA 31601 CITY-ST-ZIP LKSONV ILI PLORIDA TITI F ☐ Delete TITLE Change ROBERTS, FRANK T NAME STREET ADDRESS 3309 US HWY 84 W STREET ADDRESS CITY-ST-ZIP VALDOSTA GA 31601 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS 1604 STOCKTON CITY-ST-ZIP CITY-ST-ZIP FLORIDA 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:

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

ther like empowered

WILLIAM R. ROBERTS 3/15/02

_ 9043843660 Daytime Phone #