2002 UNIFORM BUSINESS REPORT (UBR)

Mar 07, 2002 8:00 am Secretary of State DOCUMENT # 133485 1. Entity Name 03-07-2002 90058 035 ***150.00 THEO INVESTMENT COMPANY, INC. Principal Place of Business Mailing Address 9576 A 89TH CT RD 9576 A 89TH CT RD OCALA FL 34481 OCALA FL 34481 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 59-0860238 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 مرشواة والأراز والمورجات CONSTANTINE, GREGORY JR Street Address (P.O. Box Number is Not Acceptable) 9576 A 89TH COURT ROAD **OCALA FL 34481** City Zip Code FL 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 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 \$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 **TITLE** ☐ Delete TITLE ☐ Change ☐ Addition NAME CONSTANTINE, BARBARA NAME STREET ADDRESS 9576 A S.W. 89TH COURT ROAD STREET ADDRESS CITY-ST-ZIP OCALA FL 34481 CITY-ST-7IP TITLE □ Delete TITLE Change ☐ Addition NAME HARROLD, CAROL NAME STREET ADDRESS 1312 S. MAIN ST. STREET ADDRESS CITY-ST-ZIP FINDLAY OH 45840 CITY-ST-ZIP TIT! F **VD** Delete TIT! F ☐ Change ☐ Addition NAME CONSTANTINE, KENNETH, B STREET ADDRESS **28 MASCOMA STREET** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **QUINCY MA 02170** TITLE ☐ Delete TITLE Change ☐ Addition NAME CONSTANTINE, GREGORY JR. NAME STREET ADDRESS 9576 -A SW 89TH COURT ROAD STREET ADDRESS CITY-ST-ZIP OCALA FL 34481 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7JP 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 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

FILED

Frebruary 22, 2002 (352) 873