2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 217877 Feb 13, 2000 8:00 am 1. Entity Name ROPER-MCALLISTER, INC. **Secretary of State** 02-13-2000 90022 024 ***150.00 Principal Place of Business Mailing Address 120 S. DILLARD ST. 120 S. DILLARD ST. P.O. BOX 770218 P.O. BOX 770218 WINTER GARDEN FLA 34777-0218 WINTER GARDEN FL 34777 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-6070383 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 Name ROPER. BERT E Street Address (P.O. Box Number is Not Acceptable) 120 S DILLARD WINTER GARDEN FL 34787 City Zin 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Delete TITLE Change Addition ELROD, JEAN NAME NAME 536 BUTLER ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE WINDERMERE FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE ENGSTROM, DEAN C. STREET ADDRESS 120 S. DILLARD ST. STREET ADDRESS 34767 CITY-ST-ZIP CITY-ST-ZIP WINTER GARDEN FL ☐ Change Addition ☐ Delete ROPER, BERT E. NAME STREET ADDRESS 120 S. DILLARD ST. STREET ADDRESS 34787 CITY-ST-ZIP CITY-ST-ZIF WINTER GARDEN FL Change Addition Delete TITLE TITLE DUPPENTHALER, D.E. NAME NAME 120 S. DILLARD ST. STREET ADDRESS STREET ADDRESS 34187 CITY-ST-ZIP WINTER GARDEN FL CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE 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 eath; that I am an officer or director of the corporation or the receiver of 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 changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address and the second of the second

of the corporation or the receiver of trustee empowered to exec changed, or on an attachment with an address with all other like

SIGNATURE: