2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachmer

SIGNATURE:

Jan 16, 2002 8:00 am Secretary of State DOCUMENT # 256935 1. Entity Name MARVIN E. GROSS ENTERPRISES, INC. 01-16-2002 90074 024 ***150.00 Principal Place of Business Mailing Address 10750 LANNOM LANE 10750 LANNOM LANE SARASOTA FL 34240 SARASOTA FL 34240 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 59-1025642 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GROSS.MARVIN E Street Address (P.O. Box Number is Not Acceptable) 10750 LANNOM LANE SARASOTA FL 34240 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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 CR2E034 (9/01 NAME GROSS, MARVIN E NAME STREET ADDRESS 10750 LANNOM LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34240 Delete TITLE Change ☐ Addition NAME NAME MCMURRY, MICHAEL A STREET ADDRESS 10750 LANNOM LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34240 ☐ Addition ☐ Detete NAME: --NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE Change ☐ Addition 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 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

Marvin E. EGross, President 1/8/02 (941) 371-2650

h all other like empowered