FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 05, 2002 8:00 am Secretary of State DOCUMENT # 295480 1. Entity Name 02-05-2002 90030 026 ***150.00 TEQUESTA AGENCY INC Mailing Address Principal Place of Business 393 TEQUESTA DR 393 TEQUESTA DR **TEQUESTA FL 33469-3098 TEQUESTA FL 33469-3098** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1112689 Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MARTYN III, CHARLES P Street Address (P.O. Box Number is Not Acceptable) 393 TEQUESTA DR **TEQUESTA FL 33469** Zip Code City 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 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Delete PTD TITLE TITLE NAME NAME MARTYN III.CHARLES P STREET ADDRESS 5332 PENNOCK POINT ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL ☐ Addition ☐ Change TITLE ☐ Delete TITLE ۷D NAME KASTEN, MARK. J NAME STREET ADDRESS STREET ADDRESS 10460 SE SILVER PALM WAY CITY-ST-ZIP CITY-ST-ZIP **TEQUESTA FL** Delete TITLE Change ☐ Addition TITLE NAME NAME HUTCHINSON, TODD P 114 OCEAN PINES TERR 248 Barbados Drive STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33477 ☐ Change ☐ Addition ☐ Delete TITLE TITLE SULLIVAN, PATRICIA W NAME 2272 SW RACQUET CLUB DR 3770 SW SUNSET STREET ADDRESS STREET ADDRESS trace cr. CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL 34990 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition Delete TITLE NAME NAME STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP