2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 05, 2001 8:00 am Secretary of State **DOCUMENT # 301864** 1. Entity Name GULF VIEW SQUARE FOOTACTION, INC. 02-05-2001 90080 028 ***150.00 Mailing Address Principal Place of Business 9409 US HWY 19 7880 BENT BRANCH DR #100 SP 665 & 669 IRVING TX 75063 710772 PT RICHEY FL 34668 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 04-2398674 Not Applicable Zip Country 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. UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 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, 2001 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. PD TITI F ☐ Delete TITLE Change NAME NAME NEVILLE, SHAWN R STREET ADDRESS STREET ADDRESS 7880 BENT BRANCH DR #100 CITY-ST-ZIP CITY-ST-ZIP **IRVING TX 75063** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME WINTON, NANCY L NAME STREET ADDRESS STREET ADDRESS 7880 BENT BRANCH DR #100 CITY-ST-7IP CITY-ST-7IP IRVING TX 75063 ☐ Addition ☐ Change ☐ Delete TITLE TITLE AS NAME RODRIGUEZ, VIKKI NAME STREET ADDRESS STREET ADDRESS 7880 BENT BRANCH DR #100 CITY-ST-ZIP CITY-ST-ZIP IRVING TX 75063 Change ☐ Delete TITLE ☐ Addition ZITES O YHTOMIT ROACH, DONALD V NAME NAME STREET ADDRESS STREET ADDRESS 7880 BENT BRANCH RD #100 CITY-ST-ZIP CITY-ST-ZIP **IRVING TX 75063** ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition

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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

NANCY L WINTON

1-29-01 (972)