2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 325492** May 08, 2000 8:00 am Secretary of State 1. Entity Name ECKERD TOBACCO COMPANY, INC. 05-08-2000 90169 045 ***150.00 Mailing Address Principal Place of Business PO BOX 10001 % CORP TAX DEPT 8333 BRYAN DAIRY ROAD DALLAS FL 75301-0001 LARGO FL 34647 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1205313 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HENDRICKS, LINDA Street Address (P.O. Box Number is Not Acceptable) 8333 BRYAN DAIRY RD ATTN RISK MANAGEMENT **LARGO FL 33777** 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** 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, 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 ☐ Change ☐ Addition TITLE □ Delete NAME NAME MILAM, DENNIS J STREET ADDRESS STREET ADDRESS 8333 BRYAN DAIRY RD CITY-ST-ZIP CITY-ST-ZIP LARGO FL Addition ☐ Change VSD Delete TITLE KELLY, E.W. 8333 BRYAN DAIRY RO SANTO, JAMES NAME STREET ADDRESS STREET ADDRESS 8333 BRYAN DAIRY ROAD ARGO FL 33777 CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Addition ☐ Change TITLE DCF0 **⊠** Delete TITLE NAME NAME WRIGHT, SAMUEL G STREET ADDRESS STREET ADDRESS 8333 BRYAN DAIRY RD CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Addition **VPAS** TITLE □ Delete TITLE NAME LEWIS, ROBERT E. NAME STREET ADDRESS STREET ADDRESS 8333 BRYAN DAIRY ROAD CITY-ST-7IP CITY-ST-7IP LARGO FL ☐ Addition TITLE Change DPCE TITLE Delete NEWMAN, FRANCIS A. NAME NAME STREET ADDRESS STREET ADDRESS 8333 BRYAN DAIRY RD CITY-ST-ZIP CITY-ST-ZIP LARGO FL Delete ☐ Change ☐ Addition TITLE NAME GLADYSZ, MARTIN W. NAME STREET ADDRESS 8333 BRYAN DAIRY RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

3. Thereby 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 Bk ck 11 or 3lock 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

en/ 24,2000

Daytime Phone #