2001 UNIFÓRM'BUSINESS REPORT (UBR)

SIGNATURE:

FILED Feb 06, 2001 8:00 am **DOCUMENT # 340507 Secretary of State BIRD KEY MAINTENANCE INC** 02-06-2001 90334 010 ***150.00 Principal Place of Business Mailing Address 1911 N. LAKE SHORE DR. 1911 N. LAKE SHORE DR. SARASOTA FL 34231 SARASOTA FL 34231 2. Principal Place of Business 3. Mailing Address Bear trao La 2202 2202 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1261113 Hudson Not Applicable Country \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Kreger KREGER, RICHARD P. Street Address (P.O. Box Number is Not Acceptable) 1911 N. LAKE SHORE DRIVE SARASOTA FL 34231 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 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, 2001 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 12. CR2E034 (10/00) Change TITLE Delete TITLE JOHNSON, APRIL N. NAME NAME 1911 N. LAKE SHORE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL **PSTD** TITLE Delete TITLE KREGER, RICHARD P. NAME NAME 1911 N. LAKE SHORE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADORESS 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

OF SONING OFFICER OR DIRECTOR