2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 03, 2000 8:00 am Secretary of State **DOCUMENT # 350418** MARTINE'S DEVELOPMENT CORPORATION 04-03-2000 90007 026 ***150.00 Mailing Address Principal Place of Business 6565 NORTH W STREET 6565 NORTH W STREET 260 PENSACOLA FL 32505-1715 631720 PENSACOLA FL 32505 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1301700 Not Applicable Country Zip Country Zip \$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 MARKS, JAMES J. JR. Street Address (P.O. Box Number is Not Acceptable) 6565 NORTH "W" ST STE 260 PENSACOLA FL 32505 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable DATE (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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11. PD Addition Change ☐ Delete TITLE TITLE MARKS, CHRISTINE T. NAME NAME 6565 NORTH "W" ST. STE 260 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP vstd Change Addition TITLE Delete TITLE MARKS, JAMES J. J NAME NAME 6565 NORTH "W" ST #260 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP Addition Change ☐ Delete TITLE NASH, NEAL NAME NAME 6565 NORTH "W" ST #260 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NASH, LIANNA MARKS NAME NAME 6565 NORTH "W" ST #260 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 changed, or on an attachment with an address, with all offer like impowered.

JAMES J. MARKS, SR