2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am Secretary of State **DOCUMENT # 384336** 1. Entity Name 05-16-2001 90382 013 ***150.00 EL RANCHO NO TENGO, INC. Principal Place of Business Mailing Address 1400 OLD COUNTRY CLUB ROAD 1400 OLD COUNTRY CLUB ROAD V J V Z J O LAKE CITY FL 32055 LAKE CITY FL 32055 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-1351704 Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent - 7. Name and Address of New Registered Agent Name HILL, JEFFREY L. Street Address (P.O. Box Number is Not Acceptable) 1400 OLD COUNTRY CLUB RD. LAKE CITY FL 32025 City Zip Code FI 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. 12. P/D TITLE ☐ Delete TITLE ☐ Change ☐ Addition HILL, JEFFREY L SR. NAME NAME STREET ADDRESS STREET ADDRESS 1400 OLD COUNTRY CLUB RD CITY-ST-ZIP CITY-ST-ZIP LAKE CITY FL 32025 VST ☐ Addition TITLE ☐ Delete TITLE Change HILL, LINDA P NAME NAME 1400 OLD COUNTRY CLUB RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32025 CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE HARTLEY, TIMOTHY NAME NAME 649 PENNSYLVANIA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32025 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change NAME STREET ADDRESS 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 changed, or on an attachment with an address, with all other like empowered. Jeffney L. Hill, 4-28-81 SIGNATURE

FILED