2001 UNIFORM BUSINESS REPORT FILED Mar 29, 2001 8:00 am DOCUMENT # 470595 **Secretary of State** 1. Entity Name 03-29-2001 90016 023 ***150.00 DOUBLE 40 DAIRY, INC. Principal Place of Business Mailing Address 131 Florence Blvd PO Box 361 DeBary, FL 32713 DeBary, FL 32713 C0038527 US 2. Principal Place of Business 3. Mailing Address 620 Bella Vista 620 Bella Vista Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1574501 Edgewater, FL Edgewater, Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired -32141-7291 US 32141-7291 Fee Required-6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HIRST, PETER C HIRST, PETER C 131 FLORENCE BLVD Street Address (P.O. Box Number is Not Acceptable) 620 BELLA VISTA DEBARY, FL 32713 32f4¶-7291 EDGEWATER is registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits this statement for the purpose of ch Peter C. Hirst 3/21/01 SIGNATURE Signature, typed or printed name of registered agent and title if applicable ired 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, 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. ☐ Change Addition Delete TITLE TITLE NAME NAME Hirst, Jeffrey C STREET ADDRESS STREET ADDRESS 6 Almond DR CITY-ST-ZIP CITY-ST-ZIF Qgala, fl 34472 □ Delete X Change Addition TITLE TITLE Hirst, Janet M 620 Bella Vista Hirst, Janet M NAME NAME P01Box 361 STREET ADDRESS STREET ADDRESS Edgewater, FL 32141-7291 CITY-ST-ZIP CITY-ST-ZIP DeBary, FL 32713 TITLE ☐ Detete TITLE Change ☐ Addition Hirst, Janet M PO Box 361 Hirst, Janet M NAME NAME 620 bella Vista STREET ADDRESS STREET ADDRESS DeBary, FL 32713 Edgewater, FL 32141-7291 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P TITLE ☐ Delete TITLE ☐ Change Addition 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 eath; 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 atta all other like empowered Peter C. Hirst 3/21/01 407-330-6783 SIGNATURE: NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #