2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 24, 2000 8:00 am Secretary of State **DOCUMENT # 493404** 1. Entity Name MOORE, HILL, WESTMORELAND, HOOK & BOLTON, P.A. 03-24-2000 90064 028 ***150.00 Principal Place of Business Mailing Address NINTH FLOOR - SUN BANK TOWER NINTH FLOOR - SUN BANK TOWER PO BOX 1792 PO BOX 1792 60044740 PENSACOLA FL 32598 PENSACOLA FL 32598-1792 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1640175 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WESTMORELAND, J LOFTON Street Address (P.O. Box Number is Not Acceptable) 220 W GARDEN ST-SUNTRUST TOWER 220 WEST GARDEN STREET PENSACOLA FL 32598-8792 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Director Change Addition NAME MOORE, H EDWARD JR NAME STREET ADDRESS STREET ADDRESS 220 W. GARDEN ST. CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL Change TITLE TITLE Addition Delete **Yesident** WESTMORELAND, J. LOFTON NAME NAME STREET ADDRESS 220 W. GARDEN ST. STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-7IP VSD TITLE ☐ Detete TITLE Change Addition NAME HILL T. LARRY NAME STREET ADDRESS 220 W GARDEN ST STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 00000 CITY-ST-ZIP ☐ Delete Change Addition TITLE BOLTON, STEPHEN F NAME NAME STREET ADDRESS STREET ADDRESS 220 W. GARDEN ST. CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME LANGSTON, YANCY F NAME STREET ADDRESS 220 W. GARDEN ST. STREET ADDRESS CITY-ST-21P PENSACOLA FL TITLE ☐ Defete TITLE Change ☐ Addition NAME HOOK, MICHAEL D NAME STREET ADDRESS STREET ADDRESS 220 W. GARDEN ST. CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL

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 distered 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.

SIGNATURE:

PÉD OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3 LS. DO 850. 434.3541

Daytime Phone #