| 2002 | UNIF | ORM | BU | JSINESS | REPO | RT | (UBR) |
|------|------|-----|----|---------|------|----|-------|
| | | | | | | | |

| DOCUM 1. Entity Name | MENT # 506419 | 9 | FILED | | | | | | | |
|--|---|----------------------------------|-------------|--|--|--|-----------------------|---------------------------|--|--|
| WOLF KNOB, INC. | | | | | | 02 JUN 24 AM 11: 03 | | | | |
| Principal Place of Business 29546 HWY 54 W ZEPHYRHILLS FL 33543 Mailing Address 29546 HWY 54 W ZEPHYRHILLS FL 33543 | | | | | SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | | | |
| Principal Place of Business 3. Mailing Address | | | | <u> </u> | | | | | | |
| 29546 State Rd. 54 29546 State Rd. 54 Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | ± | DO NOT WRITE IN THIS SPACE | | | | | |
| City & State Wesley (| | | | | 59-1788476 | | | plied For Applicable | | |
| Zip 33543-42 | | Zip 33543-4255 | Coun USA | • | | ertificate of Status Desired | \$8.75 Addi | | | |
| | 6. Name and Address of Current R | egistered Agent | | 7. Name and Address of New Registered Agent Name | | | | | | |
| WILLIAMS, ARTHUR D. 29546 HWY 54 W | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| ZEPHYRH | | | | | | | | | | |
| | | | | City | City FL Zip Code | | | | | |
| 8. The above | named entity submits this statement for | the purpose of changing its r | registere | ed office or registe | ered age | ent, or both, in the State of Florida. | | | | |
| SIGNATURE _ | Signature, typed or printed name of registered agent ar | nd title if applicable. (NOTE: | : Registere | d Agent signature require | ed when rei | nstating) DATE | | | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE After May 1, 2002 Fee Make Check Payable to Do | | | | will be \$550.00 | ate | Election Campaign Financing Trust Fund Contribution. | | 0 May Be to Fees | | |
| 11. | OFFICERS AND E | | 12. | | | DITIONS/CHANGES TO OFFICERS AT | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD WILLIAMS, ARTHUR D 29546 HWY 54 W ZEPHYRHILLS, FL 00000 | ☐ Delete | STRE | E digi ET ADDRESS -ST-ZIP | | 200006075 -06/28/02(****150.00 |)10060: <u>***</u> | 19 1.00 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV LANIER, FRANCES G. 29546 HWY 54 W ZEPHYRHILLS, FL 00000 | ☐ Delete | | | | | ☐ Change | Addition C | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD WILLIAMS, ANNE E. 29546 HWY 54 W ZEPHYRHILLS, FL 00000 | □ Delete | 4 | • | | | ☐ Change | Addition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | and Title Manager to 00000 | ☐ Delete | | | | | Change | ☐ Addition | | |
| TITLE NAME STREET AODRESS CITY-ST-ZIP | | ☐ Delete | | | | | ☐ Change | ☐ Addition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | □ Delete | CITY | EET ADDRESS ST-ZIP | | | ☐ Change | Addition | | |
| 13. hereby | certify that the information supplied with | this filing does not qualify for | the exe | mption stated in S | ection 1 | 19.07(3)(i), Florida Statutes. I further o | ertify that the in | nformation or director | | |

13. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section T19.0/3(f), Horida Statutes. Horida Catute 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

SO6419 WOLF KNOB, INC.

29546 HIGHWAY 54 WEST ZEPHYRHILLS, FLORIDA 33543 PHONE (813) 973-1001 --- TAMPA

June 14, 2002

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Uniform Business Report 2002

To Whom It May Concern:

Enclosed you will find the annual report for Wolf Knob Inc., FEI #59-1788476. The reason for the late filing was that I had a heart attack on March 13, 2002 and was away from work when our CPA sent the reports to us. I was out of the office and the reports were put aside and I found them today. Please cancel the additional fee. I will appreciate this very much.

Sincerely,

Wolf Knob, Inc.

Frances Lanier,

V. Pres./Bookkeeper

Frances I Lanier