## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## DOCUMENT # 512883 May 05, 2000 8:00 am Secretary of State 1. Entity Name ROBERT WALLICK ASSOCIATES, INC. 05-05-2000 90021 013 \*\*\*150.00 Mailing Address Principal Place of Business 971 E PLANT ST 971 E PLANT ST WINTER GARDEN FL 34787-3232 WINTER GARDEN FL 34787-3232 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 59-1694413 Not Applicable Country \$8.75 Additional Zip Ζip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WALLICK, ROBERT H Street Address (P.O. Box Number is Not Acceptable) 971 E PLANT ST WINTER GARDEN FL 32787 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. (Ciff. J 1. 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE ☐ Delete CHAMBERS, KELLY A. NAME NAME STREET ADDRESS STREET ADDRESS 314 E GENEVA ST. CITY-ST-ZIP CITY-ST-ZIP OCOEE FL Change | Addition Delete TITLE TITLE WALLICK, ROBERT H NAME NAME STREET ADDRESS STREET ADDRESS 312 E. GENEVA STREET CITY-ST-ZIP CITY-ST-ZIP OCOEE FL 34761 \*Change ☐ Addition ☐ Delete TITLE WALLICK, JEANETTE F NAME STREET ADDRESS STREET ADDRESS 312 E GENEVA ST. CITY-ST-ZIP CITY-ST-ZIP OCOEE FL ☐ Change ☐ Addition Delete TITLE TITLE WALLICK, ROBERT MARK NAME STREET ADDRESS STREET ADDRESS 308 E GENEVA ST CITY-ST-ZIP CITY-ST-7IP OCOEE FL TITLE ☐ Change Addition ☐ Delete TITLE NAME WALLICK, ROBERT K NAME STREET ADDRESS 1257 CLIMBING ROSE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32818 Change ☐ Addition TITLE Delete TITLE HERZIG, KERRY L. NAME NAME STREET ADDRESS STREET ADDRESS 316 E. GENEVA ST. CITY-ST-ZIP CITY-ST-ZIP OCOEE 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 trustee empowered be 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.

FFICER OR DIRECTOR

YPED ON PRINTED NAME OF SIGNING