2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90143 010 ***150.00

DOCUMENT # 539165

1. Entity Name

PEPCO CORP.

Principal Place of Business	Mailing Address
7130 W. TENNESSEE. ST. TALLAHASSEE FL 32304	7130 W. TENNESSEE ST. TALLAHASSEE FL 32304

As of 6-1-2001

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
31300 Blue Star Hwy	31300 Blue Star Hwy
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Midway FL	City & State: Midway FL
Zip: 32343 Country: ~~Gadsden~~ US	Zip: 32343 Country: ~~Gadsden~~ US

4. FEI Number: 59-1764877 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
POTTER, MARLENE N. 7130 W TENNESSEE TALLAHASSEE FL 32304	Name: As of 6-1-2001 Street Address (P.O. Box Number is Not Acceptable): 31300 Blue Star Hwy (U.S.90) City: Midway FL Zip Code: 32343

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 _____ DATE
Signature, type or print the name of registered agent and the title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD POTTER, PHILIP E 8015 PARLIAMENT CT TALLAHASSEE FL 32308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 3592 GARDENVIEW WAY TALLAHASSEE FL 32308	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD POTTER, MARLENE N 8015 PARLIMENT CT. TALLAHASSEE FL 32308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 3592 GARDENVIEW WAY TALLAHASSEE FL 32308	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD POTTER, KEITH A 628 RENAISSANCE POINTE #306 ALTAMONTE SPRINGS FL 32714	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1107 Greenwood St. ORLANDO FL 32801	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD POTTER, LISA A 7510 SW KEY BLVD #3311 WINTER PARK FL 32792	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	

CR2E034 (10/00)

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.

SIGNATURE: Marlene N Potter MARLENE N POTTER 4/18/01 850-576-8822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #