

41.
42.

04-24-2001 90029 022 ***150.00

DOCUMENT # 616521		Secretary of State	
1. Entity Name		04-24-2001 90029 022 ***15	
Roberts Financial Corp (SEFL)			
Principal Place of Business		Mailing Address	
137 Double Eagle CT, Aiken, S.C. 29803			
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FBI Number		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	
Patrick E. Kraft CPA 6365 NW 6th Way #160 Ft. Lauderdale, FL 33309		Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 Patrick E. Kraft		Patrick E. Kraft 5-8-01	
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	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
Pres. Philip R. Connor Jr. 137 Double Eagle Ct. Aiken, SC, 29803		Change Addition	
V.P. Sec. 137 Double Eagle Ct. Aiken, SC, 29803		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
Delete		Change Addition	
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: Philip R. Connor Jr.		4/12/01 803-644-4977	