## FILED 2003 FOR PROFIT CORPORATION Apr 23, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** 694966 DOCUMENT # 1. Entity Name 04-23-2003 90085 029 \*\*\*150.00 RAY GREEN, INC. Principal Place of Business Mailing Address P OBOX 1274 200 PIERCE ST P.O. BOX 1274 STE 2 **TAMPA FL 33602** TAMPA FL 33601 2. Principal Place of Business 3. Mailing Address 13540 N. Florida Ave. Suite, Apt, #, etc. Suite, Apt. #, etc. X CHECK HERE IF MAKING CHANGES 5+c 206 A. City & State 4. FEI Number City & State Applied For 59-2105838 TAMPA Not Applicable 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 GREEN, RAY M Street Address (P.O. Box Number is Not Acceptable) 200 PIERCE ST STE 2 5+ c 206 A TAMPA FL 33602 TAMON, FL 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. I am familiar with, and accept the obligat ions of dgistered agent RAY M. GREEN SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE TITLE . GREEN, RAYFORD M. NAME NAME 13540 N. Florida Ave, Ste206A 200 PIERCE ST STE 2 STREET ADDRESS STREET ADDRESS TAMPA, FL 33613 TAMPA FL CITY-ST-ZIP CITY-ST-71P Change Ch ☐ Addition TITLE Delete TITLE GREEN, VIOLOTA NAME NAME 13540 N. Florida Aue. StezobA 200 PIERCE ST STREET ADDRESS STREET ADDRESS TAMPA, FL 33613 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33602 TITI F ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with his 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 received or trustee expectation or the received or trustee expectation or the received of the corporation or the received of the corporation or the received of the corporation of the corporation or the received of the corporation or the received of the corporation of the corporati RAYFORD M. GREEN,

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4/7/07 (8/3) 229-5830

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