2000 UNIFORM BUSINESS REPORT (UBR)

DOCUI	MENT # 715329					_		
THE PENSACOLA PEN WHEELS, INC./PENSACOLA EMPLOY					FILED			
Principal Plac	e of Business	Mailing Address	lling Address		00 MAR -3 PM 2: 33			
2210 WARREN JERNIGAN PL PENSACOLA FL 32514 US		320 W CERVANTES ST PENSACOLA FL 32501-3030 US			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Numbe	4. FEI Number 71-5329271 Applied For Not Applicable			
Zip Country		Zip Country		5. Certificate	of Status Desired	\$8.75 Add	litional	
	6. Name and Address of Current	 Registered Agent	<u> </u>	7. Name and	Address of New Registers		' ———	
				Name				
JERNIGAN, WARREN H.			Street A	eet Address (P.O. Box Number is Not Acceptable)				
	REN JERNIGAN PLACE							
PENSACUL	A FL 32514		City		F	Zip Code	9	
8. The above	named entity submits this statement for	the purpose of changing its	registered office o	r registered agent, or bot	h, in the state of Florida.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered FILE NOW: FEE IS \$61.25 9. Election Campaign Financin Trust Fund Contribution.				\$5.00 May Be Added to Fees Make Check Payable to Department of State				
10.	OFFICERS AND DIR	FCTORS	11.	ADDITIONS/CH	ANGES TO OFFICERS AND	DIRECTORS IN	10	
TITLE NAME STREET ADDRESS	PD JERNIGAN, WARREN H 2210 WARREN JERNIGAN PL PENSACOLA FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		00003161 -03/07/00-	☐ Change	Addition	
TITLE NAME	VD YAX, LAWRENCE D 4304 BURTONWOOD DR PENSACOLA FL	EN Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		*****61.25	学術為 多	A Solition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD - SMITH, BARBARA D 5605 VESTAVIA LANE PENSACOLA FL	- □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		L S	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOARD, WILLIAM J 4525 SOUNDSIDE DR	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GULF BREEZE FL	☐ Delete	TITLE V D NAME STREET ADDRESS CITY-ST-ZIP	Pearline 11 810 W. gree Densarch	ncliendon gory st PC 32501-	□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		i), Florida Statutes. I further	Change	Addition	

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

3/2/2000 - 376 SIGNATURE: WARRENT THE NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFI