2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # 837599 May 15, 2000 8:00 am 1. Entity Name Secretary of State MARBIT INCORPORATED 05-15-2000 90163 028 ***150.00 Mailing Address Principal Place of Business P O BOX 160306 COLONIAL BANK CENTRE MOBILE AL 36616-1306 41 NORTH BELTLINE HIGHWAY MOBILE AL 36608-1201 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 63-0718313 Not Applicable \$8.75 Additional Country Country Zip Zip Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CAMPUS, JOSEPH J III Street Address (P.O. Box Number is Not Acceptable) 3298 SUMMIT BLVD #18 PENSACOLA FL 32503 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. DATE Signature, typed or printed name of registered agent and title if applicable (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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change ☐ Addition TITLE TITLE □ Delete NAME NAME SAINT, JOHN B. STREET ADDRESS STREET ADDRESS 41 NORTH BELTLINE HIGHWAY CITY-ST-ZIP CITY-ST-ZIP MOBILE AL 36608 ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME WESCH, PAUL C. STREET ADDRESS STREET ADDRESS 41 NORTH BELTLINE HIGHWAY CITY-ST-ZIP CITY-ST-71P MIBILE-AL-36608-- ____ ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME ISHEE, WILLIAM H. STREET ADDRESS STREET ADDRESS 41 NORTH BELTLINE HIGHWAY CITY-ST-ZIP CITY-ST-ZIP MOBILE AL 36608 ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME KELLY, JR. DONALD P. STREET ADDRESS STREET ADDRESS 41 NORTH BELTLINE HIGHWAY CITY-ST-ZIP CITY-ST-ZIP MOBILE AL 36608 ☐ Change ☐ Addition ☐ Delete TITLE NAME STEFAN, CHESTER J. NAME STREET ADDRESS STREET ADDRESS 41 NORTH BELTLINE HIGHWAY CITY-ST-7IP CITY-ST-ZIP MOBILE AL 36608 ☐ Change Addition | Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 supplementalized in the corporation 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 any address, with all other like empowered.