2092 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nar	IMENT # 851702 REALTY COMPANY, INC.	2		Secretary of State 01-17-2002 90046 049 ***150.00	
Principal Place of Business 951 18TH ST SO STE 200 P. O. BOX 187 BIRMINGHAM AL 35201 US		Mailing Address 951 18TH ST SO STE 200 P. O. BOX 187 BIRMINGHAM AL 35201 US			
2. Principal Place of Business		3. Mailing Address		; sentet telet onet tieft sents botte tiet olett olett eint etett eint efett (646) 1641	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & Stat	te	City & State		4. FEI Number Applied For Not Applicable	
Zip 	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current Re	gistered Agent		7. Name and Address of New Registered Agent	
OT 6055	ODATION OVERT		Name		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324			Street Address	Street Address (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	
8. The above	e named entity submits this statement for th	e purpose of changing its re	egistered office or regist	tered agent, or both, in the State of Florida.	
Tax filing i	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! After May 1, 2002	FEE IS \$150.00 Pee will be \$550.00	10. Election Campaign Financing \$5.00 May Be	
•	ría on back)		to Department of Si	tate	
11.	OFFICERS AND DIF		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLEMAN, WILLIAM 951 18TH ST SO STE 200 BIRMINGHAM AL	□ Delete	. TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C ERDREICH, STANLEY 951 18TH ST SO STE 200 BIRMINGHAM AL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC GOINGS, JR., HUBERT W. 951 18TH ST SO STE 200 BIRMINGHAM AL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BUTLER, WILLIAM A. 951 18TH ST SO STE 200 BIRMINGHAM AL	☐ 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	
of the corp	Of this report of supplemental report is true	e and accurate and that my red to execute this report as	einnatiira ehall hava tha	Section 119.07(3)(i), Florida Statutes. I further certify that the information a same legal effect as if made under eath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 11 or Block 12 if	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Phone #