2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A29866

1. Entity Name
ICOT INVESTMENT, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -1 PM 12:06

Principal Place of Business
c/o J. BOB HUMPHRIES, ESQ.
501 E. KENNEDY BLVD, #1700
TAMPA, FL 33602

Mailing Address
c/o J. BOB HUMPHRIES, ESQ.
501 E. KENNEDY BLVD., #1700
TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 13925 58TH STREET N
Suite, Apt #, etc.
City & State: CLEARWATER, FL
Zip: 33760 Country:

3. Mailing Address: 13925 58TH STREET N
Suite, Apt #, etc.
City & State: CLEARWATER, FL
Zip: 33760 Country:

4. FEI Number: 59-3001385 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HUMPHRIES, J. BOB ESQUIRE
FOWLER, WHITE, GILLEN, ET AL
501 E. KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602

7. Name and Address of New Registered Agent
Name: DENNIS W. HILL
Street Address (P.O. Box Number is Not Acceptable): 13925 58TH STREET NORTH
City: CLEARWATER FL Zip Code: 33760

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: Dennis W. Hill DENNIS W. HILL 4-28-00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record: $975,000.00

10. Amount of Capital Contributions in FLORIDA to date: $975,000.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE. SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L61133	STREET ADDRESS	
NAME	ICOT INVESTMENT, INC.		
STREET ADDRESS	c/o 501 E. KENNEDY BLVD, #1700	CITY-ST-ZIP	200003285702--9
CITY-ST-ZIP	TAMPA, FL 33602		-06/12/00--01134--007
DOCUMENT #		STREET ADDRESS	****535.00 ****535.00
NAME			
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			

CR2E003 (9/99)

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: Dennis W. Hill DENNIS W. HILL 4-28-00 (727) 524-4842
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #