2001 UNIFORM BUSINESS REPORT (UBR)

May 09, 2001 8:00 am DOCUMENT # F00000000980 Secretary of State RAPIDTURF, INC. 05-09-2001 90007 033 ***150.00 Principal Place of Business Mailing Address 101 EAST GOSHEN ROAD EXTENSION 101 EAST GOSHEN ROAD EXTENSION RINCON GA 31326 RINCON GA 31326 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 Number 58-2263459 Applied For Not Applicable Zip Country Zip 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 NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVE. TALLAHASSEE FL 32301 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) PD TITLE ☐ Delete ☐ Change ☐ Addition EGAN, MARK A NAME NAME STREET ADDRESS 101 EAST GOSHEN ROAD EXTENSION STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RINCON GA 31326 Addition TITLE ☐ Delete TITLE Change EGAN, JAMES NAME NAME STREET ADDRESS 101 EAST GOSHEN ROAD EXTENSION STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RINCON GA 31326 ☐ Addition Change TITLE ☐ Delete TITLE HARMAN, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 101 EAST GOSHEN ROAD EXTENSION CITY-ST-7IP CITY-ST-7IP RINCON GA 31326 ☐ Change ☐ Addition ☐ Delete TITLE TITLE GILLEY, GLORIA NAME NAME STREET ADDRESS 101 EAST GOSHEN ROAD EXTENSION STREET ADDRESS CITY-ST-ZIP RINCON GA 31326 CITY-ST-ZIP ☐ Change TITLE ☐ Delete ☐ Addition TITLE CONNER, FRANK NAME NAME 101 EAST GOSHEN ROAD EXTENSION STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RINCON GA 31326 TITLE ☐ Delete TITLE ☐ Change ☐ Addition RATCHFORD, ROBERT NAME NAME 101 EAST GOSHEN ROAD EXTENSION STREET ADDRESS STREET ADDRESS CITY-ST-7IP

13. 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 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 revelver 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 attachingent with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

RINCON GA 31326

912-826-2454

FILED