FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 03, 2001 8:00 am Secretary of State DOCUMENT # F0000001208 1. Entity Name FIRSTCO INC. ....... 4-03-2001 90108 030 \*\*\*150.00 Principal Place of Business Mailing Address 905 TURNBURY DRIVE 1905 TURNBURY DRIVE GREENVILLE NC 27858 **GREENVILLE NC 27858** 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 Applied For 56-2148480 Not Applicable Country 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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) 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CEO+ President Proces TITLE ☐ Delete TITI F COSBY, F. SPENCER JR. NAME NAME r. Spencer Coobu STREET ADDRESS 1905 TURNBURY DRIVE STREET ADDRESS 1905 Turnbung Drive CITY-ST-ZIP **GREENVILLE NC 27858** CITY-ST-ZIP Greenville NC 27858 Director & Chairman of Board X Change Delete TITLE TITLE John Ketner, Jr. 120. Bov 15D Soothern Pines INC 27858 HACKNEY, THOMAS B NAME NAME STREET ADDRESS 608 W. NASH STREET STREET ADDRESS CITY-ST-ZIP WILSON NC 27894 CITY - ST - ZIP CFO+ Secretary TITLE 💢 Addition TITLE Delete J. anie Rogers Drue VALLADARES, STEVEN R NAME NAME STREET ADDRESS 1905 TURNBURY DRIVE STREET ADDRESS Organuille NC 218595 CITY-ST-ZIP **GREENVILLE NC 27858** CITY - ST - ZIP TITLE Delete TITLE Change Director Edwin L. Clark Jr. NAME CARLTON, A.P. NAME 3602 Highway 264 East 219 FAYETTEVILLE STREET, SUITE 1000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC 27601 Greenville NC 37834 Director TITLE ☐ Delete Change Addition, MEDLIN, W. GRAY Dillian G. Coarner STREET ADDRESS 1307 GLENWOOD AVE., SUITE 158 STREET ADDRESS 100 BOX 3435 Greenulle NC 27836 CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC 27605 TITLE Delete TITLE Director ☐ Change Addition BERRY, DANIEL B NAME Willian A Lons STREET ADDRESS P.O. BOX 1908 STREET ADDRESS PO Brawer 7109 CITY-ST-ZIP CITY-ST-ZIP **ELIZABETH CITY NC 27909** State ville-, NC 28687

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/D/ (252)751-43 DA