2002 Uniform Business Report (UBR)

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DOCUMENT #

changed, or on an attaching

SIGNATURE:

Secretary of State 1. Entity Name CARBON RESOURCES, INC. 03-13-2002 90064 022 ***150.00 Principal Place of Business Mailing Address 1401 MANATEE AVENUE WEST 1401 MANATEE AVENUE WEST STF 520 STE 520 **BRADENTON FL 34205 BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0752537 Not Applicable Zip 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 MURRELL, FREDERICK J Street Address (P.O. Box Number is Not Acceptable) 1401 MANATEE AVE., WEST, STE 520 BRADENTON FL 34205 Zip Code FL 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) DATE 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, 2002 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PSTD** CR2E034 (9/01) TITLE ☐ Delete TITLE ☐ Change ☐ Addition MURRELL, FREDERICK J NAME NAME 8717 12TH AVE NW STREET ADDRESS STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP CITY-ST-ZIP **VD** ☐ Change TITLE ☐ Delete TITLE ☐ Addition ZAWADZKI, EDWARD A NAME NAME STREET ADDRESS 3519 DORAL PLACE STREET ADDRESS CITY-ST-7IP **LEXINGTON KY** CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE [] Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 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

EDFredericks. Murrell 3/1/02 941-747-2630

ent with an address, with all other like empowered

FILED

Mar 13, 2002 8:00 am