FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Sep 30, 2002 8:00 am Secretary of State F01000004621 DOCUMENT # 1. Entity Name 09-30-2002 90182 001 ***750.00 MODERNTECH SI, INC. Principal Place of Business Mailing Address 1626 DOWNTOWN WEST BLVD 1626 DOWNTOWN WEST BLVD KNOXVILLE TN 37919 KNOXVILLE TN 37919 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 62-1348656 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 MINOY, MARK J 🔭 🥄 Street Address (P.O. Box Number is Not Acceptable) 518 FERNSHAW AVE. **EUTIS FL 32726** Douglas Avenue 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE rinted 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 \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE ☐ Delete TITLE ☐ Change **Addition** REED, RICH NAME NAME George Church 1626 DOWNTOWN WEST BLVD STREET ADDRESS 600 Pennsylvania Drive STREET ADDRESS CITY-ST-ZIP KNOXVILLE TN CITY-ST-ZIP Exton PA VCD Delete TITLE Change ☐ Addition KIRBY, JOE NAME NAME 1626 DOWNTOWN WEST BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KNOXVILLE TN CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME WINTERBOTTOM, WARREN NAME STREET ADDRESS 600 PENNSYLVANIA DRIVE STREET ADDRESS CITY-ST-ZIP **EXTON PA** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME 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

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 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