2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 16, 2000 08:00 AM DOCUMENT # F07864 1. Entity Name **Secretary of State** J. KENNEDY AND ASSOCIATES, INC. Principal Place of Business Mailing Address 35 GLENLAKE PKY STE.475 35 GLENLAKE PKY STE.475 ATLANTA GAATLANTA GA 30328 30328 2. Principal Place of Business 3. Mailing Address 570 COLONIAL PARK DRIVE 570 COLONIAL PARK DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE 305 SHITE 305 City & State City & State 4. FEI Number Applied For ROSWELL GA ROSWELL GA 59-2048136 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П 30075 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GATLIN, B KENNETH 318 NO MONROE ST Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32302 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. 02/16/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE JS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. 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 TITLE N Delete TITLE ☐ Change ☐ Addition KOLLEN NAME LANE STREET ADDRESS 35 GLENLAKE PKWY STE 475 STREET ADDRESS CITY-ST-ZIP ATLANTA CITY-ST-ZIP GATITLE ☐ Delete TITLE X Change ☐ Addition NAME FALKENBERG, RANDALL NAME KOLLEN LANE STREET ADDRESS 35 GLENLAKE PKY STE 475 STREET ACCRESS 570 COLONIAL PARK DRIVE, SUITE 305 CITY-ST-ZIF ATLANTA GA CITY-ST-7IP ROSWELL GA30075 TITLE ☐ Deiete TILE X Change ☐ Addition NAME BARON STEPHEN J NAME BARON STEPHEN STREET ADDRESS 35 GLENLAKE PKWY STE 475 570 COLONIAL PARK DRIVE, SUITE 305 STREET ADDRESS CITY-ST-ZIP ATLANTA GA CITY-ST-ZIP ROSWELL GA 30075 TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/8

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 changed, or on an attachment with an address, with all other like empowered.