2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 18, 2002 8:00 am DOCUMENT # Secrétary of State F10093 1. Entity Name 07-18-2002 90124 023 ***550 00 RE:SOURCE SOUTH FLORIDA, INC. Principal Place of Business Mailing Address 2859 PACES FERRY RD. 2859 PACES FERRY RD. #2000 #2000 ATLANTA GA 30339 ATLANTA GA 30339 2. Principal Place of Business 3. Mailing Address 3350 Bullis Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2038003 Not Applicable 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET 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. I am familiar with, and accept the obligations of registered agent. 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 \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750,00 (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 TITLE ☐ Delete TITLE Change ☐ Addition FOYE, JOSEPH NAME STREET ADDRESS 2859 PACES FERRY RD., #2000 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30339 CITY-ST-ZIP TITLE SVPT Delete TITLE Senier Vive President Change Addition NAME HENDRIX, DANIEL T NAME Daniel T. Hendrix STREET ADDRESS 2859 PACES FERRY RD., #2000 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30339 CITY-ST-ZIP TITLE Delete SVPS TITLE NAME WILLOCH, RAYMOND S NAME STREET ADDRESS 2859 PACES FERRY RD., #2000 STREET ADDRESS CITY-ST-7IP atlanta ga 30339 CITY-ST-ZIP TITLE Delete Presi dent **X** Addition NAME Kenneth P. Priset DANIELS, KENNETH STREET ADDRESS 2859 FERRY RD #2000 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30339 CITY-ST-ZIP ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-SY-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

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

☐ Change

☐ Addition