2002 UNIFORM BUSINESS REPORT (UBR) FILED May 27, 2002 8:00 am Secretary of State DOCUMENT # F16660 1. Entity Name JACKSONVILLE CRAWDADDY CORPORATION 05-27-2002 90460 040 ***150 00 Principal Place of Business Mailing Address 4155 E LA PALMA AVE 4155 E LA PALMA AVE SUITE 250 SUITE 250 ANAHEIM CA 92807 ANAHEIM CA 92807 2. Principal Place of Business 8191 E. KAISEN 3. Mailing Address BLVO BLVN 8191 E. KA15ER Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 95-3566746 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Change ☐ Addition NAME MCMAHON, JUDITH NAME STREET ADDRESS 8191 E. KAISER BLUD 4155 E LA PALMA AVE #250 STREET ADDRESS CITY-ST-7IP ANAHEIM CA CITY-ST-ZIP ANAHEIM. CA 92808.2214 TITLE ☐ Delete TITLE **▼** Change ☐ Addition NAME TALLICHET, CECILIA NAME *STREET ADDRESS 4155 E LA PALMA AVE #250 STREET ADDRESS 92808-2214 CITY-ST-ZIP ANAHEIM CA CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME TALLICHET, DAVID C JR NAME STREET ADDRESS 4155 E LA PALMA AVE #250 STREET ADDRESS 8191-6-16A1502 BUD CITY-ST-ZIP ANAHEIM CA CITY-ST-7IP ALANTEIN, CA 92808-2214 TITLE ☐ Delete TITLE ☐ Addition NAME ROYSE, BOB D. NAME STREET ADDRESS 8191 E. KAISON BLUD 4155 E LA PALMA AVE #250 STREET ADDRESS CITY-ST-ZIP ANAHEIM CA CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME TALLICHET, CECILIA MAME STREET ADDRESS 8191 E. KAISER BLVO 4155 E LA PALMA AVE #250 STREET ADDRESS CITY-ST-ZIP ANAHEIM CA CITY_ST_7IP TITLE ☐ Delete TITLE ☐ Change Addition John D Tallichet 8191 E Kaiser Blud NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 1 DESCRIPTION OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayling Phone #