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2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Jan 30, 2003 8:00 am Secretary of State DOCUMENT # F25365 01-30-2003 90182 049 ***150.00 1. Entity Name BRYANT REALTY, INC. Principal Place of Business Mailing Address 10016051 C/O JUDITH G. BRYANT C/O JUDITH G. BRYANT 794 FOXRIDGE CTR DR #103 794 FOXRIDGE CTR DR #103 ORANGE PARK FL 32065 ORANGE PARK FL 32065 3. Mailing Address 2. Principal Place of Business G. BRYDAN Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number 59-2095086 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 Name BRYANT, JUDITH G. Street Address (P.O. Box Number is Not Acceptable) 794 FOXRIDGE CTR DR #103 ORANGE PARK FL 32065-2775 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. 4 SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME BRYANT, JUDITH G. STREET ADDRESS STREET ADDRESS 988 MARBLERIDGE CT. CITY-ST-ZIP CITY-ST-ZIP ORANGE PARK FL 32065 TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME BRYANT, JUDITY G. STREET ADDRESS STREET ADDRESS 988 MARBLERIDGE CT CITY-ST-ZIP CITY-ST-ZIP **ORANGE PARK FL 32065** ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME BRYANT, SHIELA M. STREET ADDRESS STREET ADDRESS 1700 LISMORE CT.~ CITY-ST-ZIP CITY-ST-ZIP MIDDLEBURG FL 32068 ☐ Delete ☐ Change Addition TITLE TITLE NAME BRYANT, JUDITH G. NAME STREET ADDRESS STREET ADDRESS 988 MARBLE RIDGE CT CITY-ST-ZIP CITY-ST-ZIP **ORANGE PARK FL 32065** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 10 or changed, or on an attachment

CITY-ST-ZIP

SIGNATURE:

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