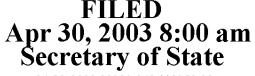
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F36121 1. Entity Name



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04-30-2003 90131 049 ***150.00 1. Entity Name R.C. HILL ENTERPRISES, INC. Principal Place of Business Mailing Address P.O. BOX 1060 P.O. BOX 1060 WINTER PARK FL 32790 WINTER PARK FL 32790 2. Principal Place of Business 3. Mailing Address c/o Yergey and Yergey, P.A. c/o Yergey and Yergey, P.A. Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 211 N. Magnolia Avenue 211 N. Magnolia Avenue City & State City & State 4. FEI Number Applied For 59-2111050 Orlando, Florida Orlando, Florida Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired 32801 32801 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YERGEY, DAVID A JR Street Address (P.O. Box Number is Not Acceptable) YERGEY AND YERGEY, P.A. 211 N. MAGNOLIA AVENUE ORLANDO FL 32801 Zip Code City 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. Signature, typed or printed name of registered agent and title if 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 Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PTSD CR2E034 (10/02) TITLE ☐ Delete TITLE Change Addition HILL, R C JR NAME NAME 1716 PALMER AVE STREET ADDRESS STREET ADDRESS WINTER PARK FL 32789 City-ST-ZIE CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition HILL, R C III NAME NAME 2211 N. HALIFAX AVE. STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32118 CITY-ST-7IE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition HILL, JEREMY R NAME NAME 3000 N ATLANTIC AVE STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32118 CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 occurate 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like employered.

CITY-ST-ZIE

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OF COMMITTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/03 Date

407-579-0111

Daytime Phone #