2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000001034

1. Entity Name: AMENDED TARPON TOWER, INC

FILED
01 JUN 13 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
255 S. Orange Ave	
Suite, Apt. #, etc. #1255	Suite, Apt. #, etc. SAME
City & State Orlando, Fl	City & State
Zip 32801 Country U.S.A.	Zip Country

4. FEI Number 87-0494366 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARY B. SHARP Suite 1255 255 S. Orange Ave #1255 Orlando, Fl 32801	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

SIGNATURE Mary B. Sharp Pres. 4/30/01
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 Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres. MARY B. SHARP 255 S. Orange Ave Suite 1255 Orlando, Fl 32801	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LS	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Finley M. Hamilton 255 S. Orange Ave Suite 1255 Orlando Fl 32801	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Senior Vice Pres. Finley M. Hamilton 255 S. Orange Ave Suite 1255 Orlando, Fl 32801	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec/Treas Michelle Brown	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec/Treas John F. Ford 255 S. Orange Ave Suite 1255 Orlando, Fl 32801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C.E.O. Kelley Ivancovich 255 S. Orange Ave Suite 1255 Orlando, Fl 32801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Michelle King 255 S. Orange Ave Suite 1255 Orlando, Fl 32801	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	400004449514--7 -06/28/01--01043--007 *****61.25 *****61.25	☐ Change ☐ Addition

CR2E034 (11/00)

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.

407/835-0016

SIGNATURE: Mary B. Sharp MARY B. SHARP, Pres. 4/30/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #