FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 19, 2002 8:00 am Secretary of State F93000001483 DOCUMENT # 1. Entity Name 02-19-2002 90092 015 ***150.00 HARRIS & HART, INC. Principal Place of Business Mailing Address 1759 WEST 1200 SOUTH 1759 WEST 1200 SOUTH B0028537 OGDEN UT 84404-5446 OGDEN UT 84404-5446 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 87-0494070 Not Applicable Zip Country 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. **PLANTATION FL 33324** City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete CR2E034 (9/01) TITLE ☐ Addition ☐ Change NAME HARRIS, RICHARD R NAME STREET ADDRESS 397 NORTH ANGEL STREET STREET ADDRESS CITY-ST-7IP KAYSVILLE UT 84037 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME HART, JAMES F NAME STREET ADDRESS 5117 RIDGEDALE DR. STREET ADDRESS CITY-ST-ZIP OGDEN, UT CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition DVPS TITLE NAME HART, BRADLEY J NAME STREET ADDRESS 2991 N 2575 WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FARR WEST UT 84404 ☐ Delete TITLE DT TITLE ☐ Change □ Addition NAME KARRAS, NOLAN E NAME STREET ADDRESS 2195 WEST 4250 SOUTH STREET ADDRESS CITY-ST-ZIP **ROY UT 84067** CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition D NAME HARRIS, CLARK R STREET ADDRESS 1916 EAST 1900 NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAYTON UT 84040 THILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. If hereby certify that the information supplied with this fifting does not gralify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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 optrustee empty effect of the corporation or the receiver optrustee empty effect is 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.

RICHARD HARRIS 1-30-2002 SIGNATURE:

801-731-0577

Daytime Phone #