2002 UNIFORM BUSINESS REPORT (UBR)

May 29, 2002 8:00 am Secretary of State DOCUMENT # F93000005397 1. Entity Name 04-30-2002 90095 021 ***150.00 BECKY THATCHER DESIGNS, INC. Principal Place of Business Mailing Address **BOX 111 BOY 111** 87937 GLEN ARBOR MI 49636 GLEN ARBOR MI 49636 2. Principal Place of Business 3. Malling Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 38-3140751 Not Applicable Zip ___ Country 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City Zip Code FI 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 end title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See cuteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE (9/01) ☐ Change ☐ Addition NAME THATCHER, BECKY NAME STREET ADDRESS **BOX 111** STREET ADDRESS CITY-ST-ZIP GLEN ARBOR MI CITY. ST. 7IP TIRE ☐ Delete TID F ☐ Change ☐ Addition NAME WATT JR, DAVID M NAME STREET ADDRESS **BOX 111** STREET ADDRESS CITY-ST-ZIP GLEN-ARBOR-MI CITY-ST-ZIP_ TITLE Defete TITLE ☐ Change Addition NAME SUMMERS, MARK C --NAME STREET ADDRESS 1801 N. ROOSEVELT BLVD. STREET ADDRESS CITY-ST-ZIF KEY WEST FL CITY-ST-ZIP TITLE Delete TITLE Thatcher, Beverly J. ☐ Change ☐ Addition NAME STREET ADDRESS 425 B Eaton Key West F STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MILE ☐ Delete TITLE ☐ Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS City-St-7P CITY-ST-ZIP Becky Thatcher TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-21P CITY-ST-ZIP 13. I hereby certify that the information supplied with this tiling indicated on this report of supplemental report is true and of the corporation or the receiver of virus at a properties, with all other changed, or on an attachment with a partieses, with all other changed. ver the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information of that my signature shall have the same legal effect as if made under oath; that I am an officer or director is report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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