**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 13, 2002 8:00 am DOCUMENT # F94000003641 **Secretary of State** 1. Entity Name MCKIBBON BROTHERS, INC. 02-13-2002 90004 004 \*\*\*150 00 Principal Place of Business Mailing Address P.O. BOX 1018 P.O. BOX 1018 **GAINESVILLE GA 30503** GAINESVILLE GA 30503 2. Principal Place of Business 3. Mailing Address Suite, Apt. # etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 58-0556299 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 Signatura Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (9/01)☐ Delete TITLE Addition MCKIBBON, J.B. 402 WAShington St. CR2E034 STREET ADDRESS 800 JESSE JEWELL PKWY. SW STREET ADDRESS CITY-ST-ZIP **GAINESVILLE GA 30501** CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME STURDIVANT, GAINES 402 WAShinston St. STREET ADDRESS STREET ADDRESS 800 JESSE JEWELL PKWY. SW CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE GA 30501 ☐ Delete TITLE Change Addition HARRIS, RICHARD M 402 WAShington St. STREET ADDRESS STREET ADDRESS 800 JESSE JEWELL PKWY. SW CITY-ST-7IP CITY-ST-ZIP **GAINESVILLE GA 30501** ☐ Delete TITLE Change Change Addition NAME NAME MCKIBBON, JOHN B III. 402 Washington St. STREET ADDRESS STREET ADDRESS 800 JESSE JEWELL PKWY. SW TOTAL AT CITY-ST-7IP CITY-ST-7IP **GAINESVILLE GA 30501** Change TITLE □ Delete TITLE Addition NAME NAME MCKIBBON, STEVE P HOZ WAShington St. STREET ADDRESS STREET ADDRESS 800 JESSE JEWELL PKWY. SW CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE GA 30501 Change ☐ Addition TITLE □ Defete TITLE NAME JACKSON, DENNIS W 🤐 NAME STREET ADDRESS 402 Washington St. STREET ADDRESS 800 JESSE JEWELL PKWY. SW

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.

CITY-ST-ZIP

CITY-ST-ZIP

GAINESVILLE: GA 30501