FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 28, 2003 8:00 am Secretary of State DOCUMENT # F95000000293 04-28-2003 90478 001 ***150.00 1. Entity Name ENCEE, INC. Principal Place of Business Mailing Address 60023150 ONE LAKE CIRCLE ONE LAKE CIRCLE KANNAPOLIS NC 28081 KANNAPOLIS NC 28081 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 56-1675214 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent -THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST., #105 TALLAHASSEE FL 32301 City 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. 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. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PC00 K Delete TITLE ★ Addition Chairman & CEO WILLIAMS, ANTHONY NAME NAME Michael T. Gannaway **IONE LAKÉ CIRCLE DRIVE** STREET ADDRESS STREET ADDRESS One Lake Circle Drive KANNAPOLIS NC 28081 CITY-ST-71P CITY-ST-7IP Kannapolis, NC 28081 TITLE VGCC ☐ Delete TITLE Change Addition isterling, John F NAME NAME STREET ADDRESS 4111 MINT WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Dallas TX 75237 TITLE **VPT** Delete TITLE ☐ Change ☐ Addition NAME POLLOCK, HENRY NAME STREET ADDRESS ONE LAKE CIRCLE DRIVE STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP <u>Kannapolis nc 28081</u> TITLE **VCFO** ☐ Delete TITLE Change ☐ Addition HARMON, MICHAEL R NAME NAME STREET ADDRESS ONE LAKE CIRCLE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KANAPOLIS NC 28081 TITLE CAS ☐ Delete TITLE ☐ Change ☐ Addition NAME DENDY, SHERRY B NAME STREET ADDRESS STREET ADDRESS ONE LAKE CIRCLE CITY-ST-ZIP CITY-ST-ZIP KANNAPOLIS NC 28081 TITLE Change ☐ Delete ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: 24,2003 (704)939-2596