(9/01)

CR2E034

Daytime Phone #

2002 Uniform Business Report (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

Apr 07, 2002 8:00 am Secretary of State DOCUMENT # F95000005510 1. Entity Name LAZY LANE FARMS, INC. 04-07-2002 90081 003 ***150.00 Principal Place of Business Mailing Address 808 17TH ST., N.W. 908 17TH ST., N.W. SUITE 300 SUITE 300 WASHINGTON DC 20006 WASHINGTON DC 20006 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 52-1587814 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 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 ROAD **PLANTATION FL 33324** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (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 12. TITLE . □ Delete TITLE ☐ Chance Addition HERBERT, LAWRENCE I NAME NAME 800 17TH ST., N.W., #301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WASHINGTON DC CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition WHITE, VIRGINIA L NAME NAME STREET ADDRESS 5615 KIRBY DR., #310 STREET ADDRESS CITY - ST- ZIE **HOUSTON TX** CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition ALLBRITTON, JOE L NAME NAME STREET ADDRESS 5615 KIRBY DR., #310 STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77005** CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition SHIPP, FRANK L NAME NAME 32128 JOHN MOSBY HIGHWAY, RT. 50 WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **UPPERVILLE VA** CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE Addition NAME GIBSON, STEPHEN P NAME STREET ADDRESS 808 17TH STREET NW #300 STREET ADDRESS WASHINGTON DC 20006 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 attact prent with an address, with all other tike empowered.