2002 UNIFORM BUSINESS REPORT (UBR)

May 24, 2002 8:00 am Secretary of State DOCUMENT # F96000006564 1. Entity Name 05-24-2002 90555 048 ***150.00 TAYLOR & MATHIS, INC. Principal Place of Business Mailing Address 115 TOWN PARK DR 175 TOWN PARK DRIVE 432902 SUITE 100 SUTIE 100 KENNESAW GA 30144-5509 KENNESAW GA 30144-5509 US 2. Principal Place of Business 3. Mailing Address 175 TOWNHARK DRIVE 75 TOWN PARK DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE SWITE 100 City & State 4. FEI Number City & State Applied For 58-1021972 ENNESAK KENNESAW GANot Applicable Country Country \$8.75 Additional 30KI4-5509 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GALE, BRIAN S Street Address (P.O. Box Number is Not Acceptable) 777 BRICKELL AVE., #610 MIAMI FL 33131 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. (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 Addition TITLE Change O. HAMILTON REYNOLDS NAME AVERY, E. H. NAME 175 TOWNPARK DRIVE, STE 100 STREET ADDRESS 175 TOWN PARK DR., SUITE 100 STREET ADDRESS CITY-ST-ZIP KENNESAW GA 30144 CITY-ST-ZIP KENNESANI GA 30144 TITLE ☐ Delete TITLE Change ☐ Addition NAME TAYLOR, ANDREW M NAME STREET ADDRESS STREET ADDRESS 175 TOWN PARK DR., SUITE 100 CITY-ST-ZIP CITY-ST-ZIP KENNESAW GA 30144 TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME _____ FLUKER-JAMES D-STREET ADORESS STREET ADDRESS 175 TOWN PARK DR SUITE 100 CITY-ST-ZIP CITY-ST-ZIP KENNESAW GA 30144 ☐ Delete TITLE Change ☐ Addition NAME NAME BATTEY, CARROLL M STREET ADDRESS STREET ADDRESS 175 TOWN PARK DR SUITE 100 CITY-ST-ZIP CITY-ST-7IP KENNESAW GA 30144 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME DOLBOW, FRANK C STREET ADDRESS STREET ADDRESS 175 TOWN PARK DR SUITE 100 CITY-ST-ZIP CITY-ST-ZIP KENNESAW GA 30144 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME O'BRIEN, D K STREET ADDRESS 175 TOWNPARK DRIVE STE 100 STREET ADDRESS

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

KENNESAW GA 30144

CITY-ST-ZIP

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