2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F97000002926 May 17, 2000 8:00 am 1. Entity Name Secretary of State **NEILL AND GUNTER INCORPORATED** 05-17-2000 90937 007 ***150.00 Principal Place of Business Mailing Address 482 PAYNE ROAD 482 PAYNE ROAD SCARBOROUGH ME 04074-8929 SCARBOROUGH ME 04074 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FFI Number City & State 01-0333227 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SHELLEY, WILLIAM F PE Street Address (P.O. Box Number is Not Acceptable) SUITE 265 2121 CORPORATE SQUARE JACKSONVILLE FL 32216 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 12. PD 13 CONT OF THE PROPERTY OF THE PARTY OF T TITI F ☐ Delete TITLE D Addition NAME SHELLEY, WILLIAM F NAME Nelson, Howard A. STREET ADDRESS STREET ADDRESS 30 FRAN CIRCLE 153 Barberry Lane CITY-ST-ZIP Ponte Vedra, FL 32082 CITY-ST-ZIP **GRAY ME 04039 X** Addition **VTSD** ☐ Delete Change TITLE TITLE Reeder, Kenneth F. BIGGS, SUSAN J NAME NAME 81 Springwater Lane STREET ADDRESS STREET ADDRESS 23 SYLVAN ROAD New Maryland, N.B. Canada-E3C 1H8 CITY-ST-7IP CITY-ST-ZIP-SCARBOROUGH ME 04074 -Change X Addition ☐ Delete TITLE TITLE Rent, Peter J. RR #2 Mount Uniacke PREBLE, WALDO C NAME NAME STREET ADDRESS STREET ADDRESS 31 PINE CONE LODGES ROAD Hants County, N.S. BON 120 CITY-ST-ZIP CITY-ST-ZIP RAYMOND ME 04071 Change ☐ Addition Delete TITLE NOLAN, RODERICK C NAME NAME STREET ADDRESS STREET ADDRESS 191 PROSPECT STREET/FREDERICTON CITY-ST-ZIP CITY-ST-ZIP NB CANADA E3B 5B4 ☐ Delete TITLE Change ☐ Addition BREGMAN, EDWARD A NAME STREET ADDRESS STREET ADDRESS 34 FRAN CIRCLE CITY-ST-ZIP CITY-ST-ZIP **GRAY ME 04039** Change ☐ Addition ☐ Delete TITLE NEILL, ROBERT D NAME NAME STREET ADDRESS STREET ADDRESS 191 PROSPECT STREET/FREDERICTON CITY-ST-7IP CITY-ST-ZIP NB CANADA E3B 5B4

13. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

SIGNATURE AND WHEO OR PRINTED NAME OF SIGNING DA

Susan J. Biggs

4-23-00

201.883.3355

Daytime Phone #