2000 UNIFORM BUSINESS REPORT (UBR)

GMATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # F9700005998 Mar 31, 2000 8:00 am Secretary of State 1. Entity Name OMNICORP RESOURCES, INC. 03-31-2000 90051 047 ***150.00 Principal Place of Business Mailing Address 1300 PARKWOOD CIRCLE, STE 400 1300 PARKWOOD CIRCLE, STE 400 ATLANTA GA 30339-2919 2143 ATLANTA GA 30339 MTLANTA, 6A 30 339-2143 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 58-2105436 Not Applicable Zip Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. 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. 11. Change ☐ Addition Delete TITLE TITLE DP NAME CONWAY, BARRY T 1300 PARKWOOD CIRCLE STREET ADDRESS STREET ADDRESS 6640 POWERS FERRY RD., STE. 200 STE 400 1300 Parkwood Cr, Ste 400, Atlanta, GA 30339 CITY-ST-ZIP CITY-ST-ZIP 1300 Parkwood Cr, Ste 400, Atlanta, GA 30339 ATLANTA GA 30339 1300 Parkwood Cr, Ste 400, Atlanta, GA 3033 Change ☐ Addition ☐ Delete TITLE TITLE D٧ 1300 Parkwood Cr, Ste 400, Atlanta, GA 30339 SCOTT, ALBERT L 1300 PARKWOOD CIRCLE 6640 POWERS FERRY RD., STE. 200 STE 400 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30339 **X** Change ☐ Addition Delete TITLE TITLE NAME BROCK, ALLEN J 1300 PARKLOOD CIRCLE STREET ADDRESS Signer ADDDECS 6640 POWERS FERRY RD, STE. 200 400 1300 Parkwood Cr, Ste 400, Atlanta, GA 30339 CITY-ST-7IP ST-ZIP atlanta ga 30339 1300 Parkwood Cr. Ste 400, Atlanta, GA 30339 1300 Parkwood Cr, Ste 400, Atlanta, GA 30339) ☐ Addition TITLE S 1300 Parkwood Cr, Ste 400, Atlanta, GA 30339 PERKINS, FLORA D 1300 PARKWOOD CIRCLE NAME STREET ADDRESS 6640 POWERS FERRY RD., STE. 200 4 00 CITY-ST-ZIP ST-ZIP ATLANTA GA 30339 ☐ Delete Change ☐ Addition STREET ADDRESS CITY-ST-ZIP ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS *CDD553 CITY-ST-ZIP ST-ZIP I hereby certify that the information supplied with this filing does per 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 accorate 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 ike embow