2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F9900003301 Sep 12, 2000 8:00 am Secretary of State 1. Entity Name KLEINERT'S RETAIL, INC. 09-12-2000 90149 008 ***550.00 Principal Place of Business Mailing Address 2251 OLD CURTIS ROAD 2251 OLD CURTIS ROAD **ELBA AL 36323** ELBA AL 36323 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FE! Number Applied For APPLIED FOR 52-21*77* 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 Name -CONNORS, JOSPEH J Street Address (P.O. Box Number is Not Acceptable) 4949 INTERNATIONAL DRIVE EXTENSION ORLANDO FL 32819 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 Fiorida. 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 \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 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 11. 12. CD ☐ Delete Change ☐ Addition TITLE TITLE BRIER, JACK NAME NAME 2251 OLD CURTIS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP **ELBA AL 36323** DTAS ☐ Delete TITLE Change ☐ Addition TITLE CONNORS, JOSEPH J NAME NAME 2251 OLD CURTIS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ELBA AL 36323** TITLE ☐ Delete TITLE ☐ Change ☐ Addition ANDREWS, JAY-NAME NAME STREET ADDRESS 2251 OLD CURTIS ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ELBA AL 36323** Delete TITLE TITLE ☐ Change ☐ Addition COWEN, MYRNA NAME NAME STREET ADDRESS STREET ADDRESS 2251 OLD CURTIS ROAD CITY-ST-ZIP CITY-ST-ZIP **ELBA AL 36323** TITLE ☐ Change ☐ Addition TITLE ☐ Delete RIESENBACH, E. GERALD NAME NAME STREET ADDRESS STREET ADDRESS 2251 OLD CURTIS ROAD CITY-ST-ZIP CITY-ST-ZIP **ELBA AL 36323** ☐ Delete TITLE DIVISIONAL CONTROllER ☐ Change Addition TITLE DONNA LOGAN NAME NAME 2251 old Ciretis Road STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP FlbA, AL 36323

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 channed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



8/00 334-897-5764 x210