2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # G41096 Sep 12, 2000 8:00 am 1. Entity Name DEAN R. COLVER, INC. Secretary of State 09-12-2000 90016 012 ***150.00 Principal Place of Business Mailing Address 4081 OLD MILL COVE TR W 4081 OLD MILL COVE TR W JACKSONVILLE FL 32277 JACKSONVILLE FL 32277 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-2301175 Not Applicable Zip Country Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COLVER, DEAN R Street Address (P.O. Box Number is Not Acceptable) 4081 OLD MILL COVE TRAIL W JACKSONVILLE FL 32277 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 \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees M (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PTD Delete TITLE ☐ Change ☐ Addition TITLE COLVER, DEAN R. NAME NAME STREET ADDRESS STREET ADDRESS 4081 OLD MILL COVE TR W CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE COLVER, VIVIENNE K. NAME STREET ADDRESS 4081 OLD MILL COVE TR W. STREET ADDRESS CITY-SI-ZIE CITY-ST-ZIP JACKSONVILLE FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

attachment G41096 B0105989

> Dean R. Colver, Inc. 4081 Old Mill Cove Tr. W. Jacksonville, FL 32277-1568 September 5, 2000 (904) 743-2191

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

My apologies to you for not having submitted this report earlier although it is still within the allotted time. I started to pay the fee when I saw that your report was a second notice and required a somewhat higher fee. Had I received the first notice I would have paid the fee as I had done in the past but unfortunately I never got that notice.

Would you kindly accept payment of \$150.00 as renewal for my annual report? Having been incorporated in the State of Florida for the past 17 years I try to pay my bills before their due date and to my knowledge the company has always paid the Uniform Business Report by the due date. There is no formal system for triggering annual payments therefore I am handicapped in knowing that a payment was due to the State unless a notice was actually received.

Please contact me directly if you have any questions. Thank you for your understanding and cooperation in this matter.

Respectfully yours,

Dean R. Colver,

President