

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 01, 2001 08:00 AM**
Secretary of State**DOCUMENT # G44452**1. Entity Name
FIRST SOUTH, INC.**Principal Place of Business**

1416 N OHIO AVENUE

LIVE OAK
32060

FL

US

Mailing Address

P O BOX 10

LIVE OAK
32064

FL

US

2. Principal Place of Business

RT. 20 BOX 849

3. Mailing Address

RT. 20 BOX 849

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

LAKE CITY

FL

Zip
32055Country
US**City & State**

LAKE CITY

FL

Zip
32055Country
US**4. FEI Number**

59-2312543

Applied For☐ Not Applicable**5. Certificate of Status Desired**☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**DARBY MICHAEL M
1416 N OHIO AVENUELIVE OAK
32060

FL

US

7. Name and Address of New Registered Agent**Name**

DARBY MICHAEL M

Street Address (P.O. Box Number is Not Acceptable)
RT. 20 BOX 849City
LAKE CITY

FL

Zip Code
32055

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)

05/01/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE DST ☐ Delete
NAME DARBY DONNA MSEC-TRE
STREET ADDRESS 1416 N OHIO AVENUE
CITY-ST-ZIP LIVE OAK FL 32060TITLE PD ☐ Delete
NAME DARBY MICHAEL MPRES
STREET ADDRESS 1416 N OHIO AVENUE
CITY-ST-ZIP LIVE OAK FL 32060TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE DST ☒ Change ☐ Addition
NAME DARBY DONNA MSEC-TRE
STREET ADDRESS RT. 20 BOX 849
CITY-ST-ZIP LAKE CITY FL 32055TITLE PD ☒ Change ☐ Addition
NAME DARBY MICHAEL MPRES
STREET ADDRESS RT. 20 BOX 849
CITY-ST-ZIP LAKE CITY FL 32055TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE: MICHAEL M. DARBY

P

05/01/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)