## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: Daniel W. Henderson, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Apr 25, 2000 8:00 am Secretary of State **DOCUMENT # G88316** 1. Entity Name D.W.H. CORPORATION 04-25-2000 90055 049 \*\*\*150.00 Principal Place of Business Mailing Address 1130 E. FRENCH AVENUE 1130 E. FRENCH AVENUE **ORANGE CITY FL 32763-5406** ORANGE CITY FL 32763 C0072302 2. Principal Place of Business 3. Mailing Address P.O. Box 740058 1451 W. French Avenue Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2383510 Orange City FL Orange City FL Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32763 32774-0058 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HENDERSON, DANIEL W. Street Address (P.O. Box Number is Not Acceptable) 1451 West French Avenue 1130 E. FRENCH AVENUE ORANGE CITY FL 32763 Orange City 8. The above parmed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 04/17/00 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00. This corporation is eligible to satisfy its Intangible IO.—Election Campaign Financing \$5:00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) X Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE PTD Delete TITLE Change ☐ Addition HENDERSON, DANIEL W. NAME NAME STREET ADDRESS 1451 West French Avenue STREET ADDRESS 1130 E. FRENCH AVE. CITY-ST-ZIP CITY-ST-ZIP ORANGE CITY FL Orange City, FL 32763 X Change ☐ Addition Delete TITI F TITLE HENDERSON, NATALIE NAME NAME STREET ADDRESS STREET ADDRESS 1130 FRENCH AVE 1451 West French Avenue CiTY-ST-7IP CITY-ST-ZIP **ORANGE CITY FL** Orange City, FL 32763 ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP 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.

904-775-6100