2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 06, 2001 8:00 am Secretary of State **DOCUMENT # G89830** 1. Entity Name SELLAR, SEWELL, RUSS, SAYLOR & JOHNSON, P. A. 02-06-2001 90279 031 ***150.00 Principal Place of Business Mailing Address 907 WEBSTER ST. 907 WEBSTER ST. P.O. BOX 492722 P.O. BOX 492722 LEESBURG FL 34749-9722 LEESBURG FL 34749-9722 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 59-2385063 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 SEWELL, STEPHEN G Street Address (P.O. Box Number is Not Acceptable) 907 WEBSTER STREET LEESBURG FL 34748 Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TP-TITLE **Z** Delete TITLE ☐ Change ☐ Addition SELLAR, CHARLES B. P. NAME NAME 6191 S. SILVER LAKE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEESBURG-FL CITY-ST-ZIP President/Director VD PACSIDENT / DIRECTOK Delete TITLE TITLE ! Addition SAYLOR, BRUCE A. S CCRUTONY TRASUNCH Secretary/Treasurer NAME NAME 2919 COCOVIA WAY STREET ADDRESS Saylor, Bruce A. STREET ADDRESS CITY-ST-ZIP LEESBURG FL CITY-ST-ZIP Director TITLE ☐ Addition Director RUSS, GEORGE H. NAME NAME Russ, George H. 36049 SPRING LAKE BLVD. STREET ADDRESS STREET ADORESS CITY-ST-ZIP FRUITLAND PARK FL CITY-ST-ZIP DIRECTON TITLE Vice President/Director X Change ☐ Delete VICE SEWELL, STEPHEN G. NAME NAME Sewell, Stephen G. 1001 SHORE ACRES DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP LEESBURG FL CITY-ST-ZIP ASD TITLE ☐ Delete TITLE Change ☐ Addition JOHNSON, CHARLES, D NAME 38917 MICHELLE ST STREET ADDRESS STREET ADDRESS LADY LAKE FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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. Bruce A. Saylor 1/31/61 SIGNATURE: