2002 UNIFORM BUSINESS REPORT (UBR)

Jan 23, 2002 8:00 am Secretary of State DOCUMENT # G94042 1. Entity Name SCRUGGS & CARMICHAEL, P.A. 01-23-2002 90088 005 ***150.00 Principal Place of Business Mailing Address ONE SOUTHEAST FIRST AVENUE ONE SOUTHEAST FIRST AVENUE GAINESVILLE FL 32601 GAINESVILLE FL 32601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2391595 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Cushman, Stan, Esq. Street Address (P.b. Box Number is Not Acceptable) ROSCOW, JOHN F. III, ESQ. ONE SOUTHEAST FIRST AVENUE One Southeast First Avenue **GAINESVILLE FL 32601** City Zip Code 32601 Gainesville 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, 2002 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (9/01) TITLE Delete Change Change ☐ Addition DP CUSHMAN, STAN NAME NAME Cushman, Stan ONE SOUTHEAST FIRST AVE STREET ADDRESS STREET ADORESS One Southeast First Avenue GAINESVILLE FL CITY-ST-ZIP CITY-ST-ZIP Gainesville, FL ☐ Delete TITLE Change ☐ Addition TITLE DELANEY, PHILIP A. NAME NAMÉ STREET ADDRESS ONE SOUTHEAST FIRST AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL TITLE Delete --TITLE Change ☐ Addition \mathbf{D} NAME ROSCOW, JOHN F. III NAME Roscow, John F. III One Southeast First Avenue STREET ADDRESS ONE SOUTHEAST FIRST AVE STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL CITY-ST-ZIP Gainesville, FL ☐ Addition TITLE ☐ Defete TITLE Change NAME austin, mitzi c. NAME ONE SOUTHEAST FIRST AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL CITY-ST-ZIP ☐ Change TITLE Delete TITLE ☐ Addition 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

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.

13. Thereby 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

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

1/10/02 352-376-5242 Dayline Phone #

FILED