2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 26, 2001 8:00 am Secretary of State **DOCUMENT # H09827** 1. Entity Name DONALD H. SNYDER, P.A. 04-26-2001 90242 014 ***150.00 Principal Place of Business Mailing Address % Donald H. Snyder Jr. % Donald H. Snyder Jr. 5603 26TH STREET WEST 5603 26TH STREET WEST **BRADENTON FL 34207 BRADENTON FL 34207** 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. FEI Number Applied For 59-2419996 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 SNYDER, DONALD H JR Street Address (P.O. Box Number is Not Acceptable) 5603 26TH STREET WEST **BRADENTON FL 34207** City Zip Code 8. The above named ontity 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 primed name of registored agent and H e if applicable (NOTE: Registered Agent's gnature required when reinstating) DATE FILE NOWH FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 THE ☐ Delete TITLE Change Addition SNYDER, DONALD H JR NAME NAME 5603 26 ST W. STREET ADDRESS STREET ADDRESS CIEY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP ☐ Dalete TITLE TIME ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY-ST-ZIP T.T: F ☐ Delete و إداد ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIF CITY-ST-ZIP TITLE ☐ Delete 1018 ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY- ST-Z:P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Adoit on NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZiP CITY-ST-ZIP TITLE TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-Z:P 13. I horeby 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 of the province.

Donald H. Snyder, Jr. 4/18/01