2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H65162 **FILED** Sep 18, 2000 8:00 am P.H.C.S&W. HOLDINGS OF SOUTH FLORIDA, INC. Secretary of State 09-18-2000 90016 038 ***550.00 Principal Place of Business Mailing Address 2161 PALM BEACH LAKES BLVD C/O LARRY A. CHURCH PO BOX 38 SUITE 417 WEST PALM BEACH FL 33409 WINTER PARK FL 32790-0038 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2657442 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 CHURCH, LARRY Street Address (P.O. Box Number is Not Acceptable) 600 COURTLAND ST **STE 260** ORLANDO FL 32804 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition ☐ Change TITLE Delete TITI F PARDUE, WILLIAM P JR. NAME NAME STREET ADDRESS **PO BOX 38** STREET ADDRESS CITY-ST-ZIP **WINTER PARK FL 32790-0038** CITY-ST-ZIP Addition Delete ☐ Change TITLE CHURCH, LARRY A NAME **PO BOX 38** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32790-0038 CITY-ST-ZIP Delete Addition ☐ Change TITLE 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 ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

NAME OF SIGNING OFFICER OR DIRECTOR

A. CHURCH

CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

9/12/00 407-644-9922 Dayuma Phone #