2001 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

ment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Apr 23, 2001 8:00 am Secretary of State **DOCUMENT # H91362** 1. Entity Name DEVELOPMENT INVESTMENTS, INC. 04-23-2001 90007 014 ***150.00 Principal Place of Business Mailing Address 300 E SUGARLAND HWY 300 E SUGARLAND HWY P O BOX 1237 P O BOX 1237 **CLEWISTON FL 33440** CLEWISTON FL 33440 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2619339 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name YAUN, JOHN A. Street Address (P.O. Box Number is Not Acceptable) 848 WEST VENTURA AVENUE **CLEWISTON FL 33440** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition President/Director TITI F XXXDelete TITLE NAME Miller Couse NAME KURTZ, HOWARD E. STREET ADDRESS STREET ADDRESS 300 E SUGARLAND HWY 300 E Sugarland Hwy CITY-ST-ZIP CITY-ST-ZIP CLEWISTON FL. Clewiston FL 33440_ ☐ Change (X) Addition TITLE -☐ Delete TITLE SVP NAME NAME Jack D Webb COUSE, MILLER STREET ADDRESS STREET ADDRESS 300 E Sugarland Hwy 300 E SUGARLAND HWY CITY-ST-ZIP CITY-ST-ZIP Clewiston FL 33440 CLEWISTON FL Change Addition TITLE ☐ Delete TITLE NAME WOOD, RANDALL N NAME STREET ADDRESS STREET ADDRESS 300 E SUGARLAND HWY CITY-ST-ZIP CITY-ST-7IP CLEWISTON FL Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME FLETCHER, DEBORAH L. STREET ADDRESS STREET ADDRESS 300 E.SUGARLAND HWY. CITY-ST-ZIP CITY-ST-ZIP CLEWISTON FL Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

Randall N Wood

04/13/01

Date

863 983 8191

Daytime Phone #

FILED