## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 03, 2000 8:00 am **DOCUMENT # J00127** Secretary of State EARTH INVESTMENTS AND DEVELOPMENT CO., INC. 03-03-2000 90017 027 \*\*\*150.00 ....Mailing Address 3401 LANNIE RD 3401 LANNIE ROAD JACKSONVILLE FL 32218-1233 JACKSONVILLE FL 32218 AUUADHAH Lov 3. Mailing Address 2. Principal Place of Business Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-2748149 Not Applicable Country \$8.75 Additional 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 BETZ, ROBERT Street Address (P.O. Box Number is Not Acceptable) 3401 LANNIE ROAD JACKSONVILLE FL 32218 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change TITLE ☐ Delete TITLE BETZ, LAMAR R. NAME NAME STREET ADDRESS 3401 LANNIE RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL Change ☐ Addition VST TITLE ☐ Delete NAME Betz, Julie NAME STREET ADDRESS STREET ADDRESS 3401 LANNIE RD CITY-ST-ZIP JACKSONVILLE FL 32218 CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE MATTHEWS, TERRY NAME NAME STREET ADDRESS STREET ADDRESS 3474 BETZ LANDING DRIVE CITY-ST-7IP CITY-ST-ZIP JACKSONVILLE FL 32226 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7JP CITY-ST-ZIP □ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition

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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE:

TITLE NAME

STREET ADDRESS

SE SIGNING OFFICER OF DIRECTOR SIGNAZURE AND TYPED OR PRINTED NAME

Delete