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| NAME STREET ADDRESS CITY-ST-ZIP CAMBERLEY SU TITLE HUNTINGDON, DAVID C. STREET ADDRESS CITY-ST-ZIP NAME HUNT, NIGEL L. STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP CAMBERLEY SU Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CAMBERLEY SU Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CAMBERLEY SU Delete TITLE ST ST ST ST ST ST ST ST ST S | | | | EPONI | (OB) | | FIL Mar 20, 20 Secretary 03-20-2000 9010 | 000 8:0 y of Sta | ite | |
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| City & State City & State City & State City & State Country C | 1451 ENTERPRISE CT SUITE B MELBOURNE FL 32934 US | | 4451 ENTERPRISE SUITE 8 MELBOÜRNE FL 3 US 3. Mailing Addre | 4451 ENTERPRISE CT SUITE B MELBOURNE FL 32934-9228 US | | | | | | |
| S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Norte JEFFREY 4451 ENTERPRISE COURT SUITE B MELBOURNE FL 32434-9228 City The above named entity submiss this statement for the purpose of changing its registered agent, or both, in the State of Florida SIGNATURE Systems, load or portion in the statement for the purpose of changing its registered agent, or both, in the State of Florida SIGNATURE Systems, load or portion in the statement for the purpose of changing its registered agent, or both, in the State of Florida SIGNATURE Systems, load or portion in the statement for the purpose of changing its registered agent, or both, in the State of Florida FL IVID Systems, load or portion agent in the purpose of changing its registered agent, or both, in the State of Florida FL IVID Systems, load or portion agent in the purpose of changing its registered agent, or both, in the State of Florida FL IVID Systems, load or portion agent in the purpose of changing its registered agent, or both, in the State of Florida FL IVID Systems, load or portion agent in the purpose of changing its registered agent, or both, in the State of Florida FL IVID Systems, load or portion agent in the purpose of changing its registered agent, or both, in the State of Florida FL IVID After MAY 1, 2000 Fee will be \$\$550.00 After MAY 1, 2000 Fee will be \$\$50.00 After MAY 1, 2000 | | | | | | 4. | | | plied For | |
| Name Name Street Address (P.O. Box Number is Not Acceptable) Name Street Address (P.O. Box Number is Not Acceptable) | Zip | Country | Zip | Zip Country | | 5. | | \$8.75 Add | ditional | |
| Sired Address (PO-Box Number is Not Acceptable) Sired Address (PO-Box Number is Not Acceptable) Sired Address (PO-Box Number is Not Acceptable) City FL Zip Code City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Fior da. SIGNATURE Signature, types or prime name or registered agent, or both, in the State of Fior da. SIGNATURE Signature, types or prime name or registered agent agent and telephocate in appearable. In the Policy of the Po | | 6. Name and Address of Current | Registered Agent | stered Agent | | 7. | 7. Name and Address of New Registered Agent | | | |
| 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, topical or purpose of purpose of purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, topical or purpose of purpos | 4451 ENTERPRISE COURT SUITE B | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| TITLE PD EBENEZER, DUKE R. Defete TITLE NAME STREET ADDRESS CYNY ST-ZIP CAMBERLEY SU Defete TITLE NAME STREET ADDRESS CYNY-ST-ZIP CAMBERLEY SU Defete TITLE CAMBERLEY SU Defete TITLE CYN WAY FRIMLEY RD Defete TITLE CYN-ST-ZIP CAMBERLEY SU Defete TITLE CYN-ST-ZIP CAMBERLEY SU Defete TITLE CYN-ST-ZIP CAMBERLEY SU Defete TITLE CYN WAY FRIMLEY RD Defete TITLE CAMBERLEY SU Defete TITLE CYN WAY FRIMLEY RD CYN WA | 9. This corpo | oration is eligible to satisfy its Intangible equirement and elects to do so. | FIL After M | NOW!!! FEE | IS \$150.0 will be \$5 | 0 50.00 | 10. Election Campaign Financin | 9 _ \$5.0 | | |
| TITLE NAME HUNTINGDON, DAVID C. STREET ADDRESS CITY-ST-ZIP CAMBERLEY SU Delete TITLE VD HUNT, NIGEL L. LYON WAY FRIMLEY RD CTY-ST-ZIP CAMBERLEY SU Delete TITLE VD HUNT, NIGEL L. STREET ADDRESS CITY-ST-ZIP CAMBERLEY SU Delete TITLE VD HUNT, NIGEL L. STREET ADDRESS CITY-ST-ZIP CAMBERLEY SU Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET A | TITLE NAME STREET ADDRESS | PD EBENEZER, DUKE R. LYON WAY FRIMLEY RD | | e ete titli NAM Stre | IE EET ADDRESS | BENEZ SAYONY | ER, DUKE R WAY, BHACKBUSHE | | S IN 11 | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | NAME STREET ADDRESS | HUNTINGDON, DAVID C. LYON WAY FRIMLEY RD CAMBERLEY SU | . D | NAM STRE | IE EET ADORESS | V HUNTIN SAKON | GOON, DAVID C WAY, RLACKBUSHE | | ☐ Addition | |
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| NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS | NAME STREET ADDRESS | | | NAM STRE | IÉ EET ADDRESS | | _ | ☐ Change | ☐ Addition | |
| 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 | NAME STREET ADDRESS CITY-ST-ZIP | \wedge | | NAM STRE CITY | IE EET ADDRESS '-ST-ZIP | | | | Addition | |

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 trus eet mpowered 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 autoress, with all other like empowered.

| GNATURE: | SIGNATURE AND TYPED OFFICER OR DIRECTOR | Date | D

SIGNATURE: