2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **J57506** 1. Entity Name **Secretary of State** ROBERT L. HAMMER, INC. 03-24-2000 90088 030 ***150.00 Principal Place of Business Mailing Address 1526 SE 16TH PLACE 1526 SE 16TH PLACE CAPE CORAL FL 33990-3851 UAUUAI CAPE CORAL FL 33990-3851 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2787520 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 SASSO, M. DANIEL PA Street Address (P.O. Box Number is Not Acceptable) 3624 DEL PRADO BLVD. 4223 DEL PRADO BLVD 5 CAPE CORAL FL 33904 - 7/67 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, typed or printed name of registered agent and title if applicable. --DATE 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, 2000 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. Delete TITLE DENMARK, LAWRENCE J JR. DENMARK, LAWRENCE J J NAME 11809 ROYAL TEE CT CAPE CORAL FL 33991-7506 1715 SE 1ST STREET STREET ADDRESS CITY-ST-7IP CAPE CORAL FL Change Change ☐ Addition ☐ Delete TITLE DENMARK, KELLY H. DENMARK, KELLY H NAME 11809 ROYAL TEE CT CAPE CORAL FL 3399/-7506 1715 SE 1ST STREET STREET ADDRESS CAPE CORAL FL CITY-ST-ZIP Addition ☐ Delete Robert L. Hammer 1827 SE van Loon Terr. NAME STREET ADDRESS apeloral, FL 33990 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS

changed, or on an attachment with an address, with all other like empowered

Y.H. DENMARK 03/11/00

Mar 24, 2000 8:00 am

11. TITLE NAME: STREET ADDRESS CITY-ST-ZIE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIF NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP

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