2001 UNIFORM BUSINESS REPORT (UBR)

May 15, 2001 8:00 am Secretary of State **DOCUMENT # J73452** 1. Entity Name 05-15-2001 90135 031 ***150.00 GILLIS, INC. Mailing Address Principal Place of Business 1673 ATLANTA PLAZA PO BOX 1094 000000770SANIBEL FL 33957 PO BOX 1094 SANIBEL FL 33957 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 59-2800016 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 MURTY, TIMOTHY J. Street Address (P.O. Box Number is Not Acceptable) 1633 PERIWINKLE WAY STE G SANIBEL FL 33957 City Zip Code 8. The above named entity subposes this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE ne of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition PD TITLE ☐ Delete BRADLEY, BONNY L. GILLIS, BONNY L. NAME STREET ADDRESS 1673 ATLANTA PLAZA STREET ADDRESS SANIBEL FL CITY-ST-ZIP CITY-ST-ZIP ☐ Addition STD ☐ Change ☐ Delete TITLE TITLE MURTY, TIMOTHY J. NAME NAME 1633 PERIWINKLE WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SANIBEL FL CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 the 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 addre

SIGNATURE:

with all other

4/29/01 941472337

Daytime Phor

Department of Health Vital Statistics

STATE OF FLORIDA MARRIAGE RECORD

TYPE IN UPPER CASE

This Scense was removed as an of Clerk, Circuit or County Court, appears thereon.

attachmens #173452

(STATE FILE NUMBER)

INSTR # 105469 N/L BK 00085 PG 3748 RECORDED 01/04/2001 02:10 PK CHARLIE GREEN CLERK OF COURT

F2000-3765					LEE COUNTY				
(APPLICATION NUMBER)						DEPUTY CLERK Betty Cruz D.C.			
APPLICATION TO MARRY									
1	DATS NAME (FIRST, RVIN CHAF	Affildio, Last) RLES BRADL	.EY					2. DATE OF BURTH (Month, Day, Year) 12/16/1963	
3a. RESIDENCE - CITY, TOWN, OR LOCATION 3b. COU SANIBEL LEE				VIV	3c, 87ATE 33957		BIRTHPLACE (State or Foreign Country) GEORGIA		
So. BRIDE'S NAME (First, Middle, Lest) BONNY LOU GILLIS					S6. MAIDEN SURNAME (If different) CARR		6. DATE OF BIRTH (Month, Day, Year) 09/28/1957		
					7c, STATE		100.000		
SANIBEL			LEE		FLORIDA		BIRTHPLACE (State or Foreign Country) ILLINOIS		
	•	WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND SELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE HOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE BAME IS KNOWN TO US AND HERBBY APPLY FOR LICENSE TO MARRY.							
	9. SIGNATURE OF GROOM (Sign full name of Manch Charles 43			12/27/2000		SUBSCRIBED AND SWORN T 2/27/ 20 00			
	71. _{1. 1} .	11. TITLE OF OFFICIAL DEPUTY CLERK			12. SIGNATURE OF OFFICIAL (Use block tris)				
		13. SIGNATURE OF BRIDE (Sign full name using black ink) 14. SUBSCRIBED AND SYFORN TO 12/27/2000					O BEFORE ME ON (DATE)		
		15. TITLE OF OFFICIAL (Use Sizek in) DEPUTY CLERK 16. SIGNATURE OF OFFICIAL (Use Sizek in)						~~	
		LICENSE TO MARRY							
		AUTHORIZATION AND LICENSE IS NETIEGY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CERSIMONY WITHIN THE STATE OF FLORIDA AND TO SOLEWINZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.							
	17. COUNTY ISSUING LICENSE LEE 208. SIGNATURE OF COURT CLERK OR JUICE >			18. CATE LICENSE ISSUED 181. DATE LICENSE 12/27/2000 12/30/2000					
				206. TITLE CHARLIE CLERK OF THE CO			REEN IRT	20c. BY D.C. BC	
		CERTIFICATE OF MARRIAGE							
		I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRICE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.							
		21. DATE OF MARRIAGE (Month, Day, Year) 22. CITY, TOWN, OR LOCATION OF MARRIAGE 23. DATE OF MARRIAGE 24. DATE OF MARRIAGE 25. CITY, TOWN, OR LOCATION OF MARRIAGE							
s								J.77 102 7	
			TILE OF PERSON PERFORM					(Use black Ink)	
			EREND	25. SOMEWITHERS TO CETEMORY (Up blackfirst)					
INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED									
GROOM	26. SOCIAL SECURITY NUMBER 27. RACE			28. WERE YOU EVER PREVIOUSLY	294. NO. OF THIS	MER IS YES' TO ITEM 28, THEN COMPLETE ITEMS 280, 280, and 29c F Tris 280, last marriage ended by 280. Date last marriage en			
			Black	MARRIED?	MARRIAGE 2	DIVORCE	(ENT)	5., Day, Year) 9/13/1996	
	NUMBER 31. RACE		31. RACE	32, WERE YOU EVER		YES TO ITEM 32, THEN CO			
BRIDE		•		PREVIOUSLY MARRIED?	33s. NO. OF THIS MARRIAGE	SIEL LAST MARRIAGE ENDED (DEATH, DIVORCE OR ANNULA	BY SSC. EEHT) (M	DATE LAST MARRIAGE ENDED	
l i			White	NO X YES	3	DIVORCE	0	6/13/1989	

DH Form 743,April 99 (Replaces reb. 91 edition)

HOERTHY THIS DOCUMENT TO BE A TRUE AND CORRECT COPY OF THE ORIGINAL ON FILE IN MY OFFICE CHARLIE GREEN, CLERK CIRCUIT COURT

LEE COUNTY, FLORIDA DATED: \/

man Jensen Deputy Clerk