2002 UNIFORM BUSINESS REPORT (UBR)

May 10, 2002 8:00 am Secretary of State DOCUMENT # K24640 1. Entity Name 05-10-2002 90050 030 ***150.00 HANGING MOSS INDUSTRIAL PROPERTIES, INC. Principal Place of Business Mailing Address 931 N. PENNSYLVANIA AVE. 931 N. PENNSYLVANIA AVE. 359221 PO BOX 3446 PO BOX 3446 WINTER PARK FL 32790 1 WINTER PARK FL 32790 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2891969 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name R. LANCE WALKER Street Address (P.O. Box Number is Not Acceptable) 931 N. PENNSYLVANIA AVE. **WINTER PARK FL 32789** City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE □ Delete TITLE ☐ Addition NAME WALKER, R. LANCE NAME STREET ADDRESS 931 N. PENNSYLVANIA AVE. STREET ADDRESS CITY-ST-ZIP WINTER PARK FL CITY-ST-ZIP TITLE DVS ☐ Delete TITLE ☐ Change ☐ Addition NAME BECK, JOHN NAME STREET ADDRESS PO BOX 626 N/A STREET ADDRESS CITY-ST-ZIP WINTER PARK FL CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

FILED

K. LANCE WALKER SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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.