FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 07, 2001 8:00 am Secretary of State **DOCUMENT # K38095** 1. Entity Name BCD INVESTMENTS, INC. 02-07-2001 90154 042 ***150.00 Principal Place of Business Mailing Address 1501 GULF BLVD 1501 GULF BLVD **UNIT 704 UNIT 704** CLEARWATER FL 33767-2903 CLEARWATER FL 33767-2903 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2290240 Not Applicable Zip Country Zip 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 Name BARLOW, WILLIAM E. Street Address (P.O. Box Number is Not Acceptable) 1501 GLUF BLVD **UNIT 704** CLEARWATER FL 33767-2903 Zip Code FL 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) 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete **Addition** TITLE NAME HUBBARD, C. DOUGLAS STREET ADDRESS 6449 COUNTRY CLUB RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WESLEY CHAPEL FL <u> 32544</u> ☐ Delete TITLE ☐ Change ☐ Addition NAME BARLOW, WILLIAM NAME STREET ADDRESS 1501 GULF BLVD UNIT 704 STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767-2903 CITY-ST-ZIP TITLE TITLE Delete ☐ Change ☐ Addition NAME BARLOW, CLARK NAME STREET ADDRESS 3711 BAYSHORE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33611 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Defete 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

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.

SIGNATURE: WILLIAM E. DARLOW VU C

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727-593-143(