FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 08, 2001 8:00 am DOCUMENT # K53276 Secretary of State TERRY V. BROUGHTON, P.A. 03-08-2001 90106 006 ***150.00 Principal Place of Business Mailing Address 1705-D2 1705-D2 COLONIAL BLVD. COLONIAL BLVD. FT MYERS FL 33907 FT MYERS FL 33907 U\$ 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 65-0090213 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Nāme BROUGHTON, TERRY V Street Address (P.O. Box Number is Not Acceptable) 1705-D2 COLONIAL BLVD. FT MYERS FL 33907 Zip Code City 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 П 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. ☐ Delete TITLE TITI F Change ☐ Addition BROUGHTON, TERRY V. NAME NAME 1705-D2 COLONIAL BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. MYERS FL CITY-ST-ZIP ☐ Addition TITLÉ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY~ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition 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.

TERRY V. BROUGHTOW

SIGNATURE: