2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Feb 13, 2001 8:00 am Secretary of State **DOCUMENT # K85745** GREENWOOD DEVELOPMENT CORPORATION OF FLORIDA, IN 02-13-2001 90054 026 ***150.00 Principal Place of Business Mailing Address C/O JULIAN J. NEXSEN. JR. C/O JULIAN J. NEXSEN. JR. P. O. BOX 1017 P. O. BOX 1017 GREENWOOD SC 29648 GREENWOOD SC 29648 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 59-0893939 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRIMSLEY, JAMES W. Street Address (P.O. Box Number is Not Acceptable) 25 WALTER MARTIN ROAD, NE FT. WALTON BEACH FL 32548 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 TITLE ☐ Addition NAME PIGG, CHARLES W NAME STREET ADDRESS 104 GLENRIDGE CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GREENWOOD SC 29649** TITLE Delete TITLE Change ☐ Addition NAME JUSTESEN, WAYNE Q., JR. NAME STREET ADDRESS 204 HARVEST LN. STREET ADDRESS CITY-ST-ZIP GREENWOOD SC 29649 CITY_ST_ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NEXSEN, JULIAN J., JR. NAME STREET ADDRESS **512 E HENRIETTA AVE** STREET ADDRESS CITY-ST-ZIP **GREENWOOD SC 29649** CITY-ST-ZIP Change TITLE ☐ Delete ☐ Addition Steverson, Joy B. NAME STEVERSON, JOY B NAME STREET ADDRESS 308 Creek Road West 234-DEER-RUN LANE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP GREENWOOD SC 29049 Greenwood, SC 29646 TITLE ☐ Delete TITLE ☐ Addition Hughes, William B. NAME HUGHES, WILLIAM B NAME STREET ADDRESS 104 MAXWELL AVE STREET ADDRESS 204 Deer Run Ln. CITY-ST-ZIP **GREENWOOD SC 29649** CITY-ST-ZIP Greenwood, SC 29649 TITLE AS ☐ Delete TITLE Change Addition NAME WATKINS, WILLIAM B NAME STREET ADDRESS 118 AMHERST DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GREENWOOD SC 29649** I hereby certify that the information supplied with this filling 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.

NG OFFICER OR DIRECTOR

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