2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L00000015064 1. Entity Name FILED MANSON-YETTER INVESTMENT PROPERTIES, L.C. OI FEB 22 PM 4:50 Principal Place of Business Mailing Address SECRETARY OF STATE 1111 - 9th Avenue West TALLAHASSEE, FLORIDA Post Office Box 9335 Suitè "B" Bradenton, Florida 34206 Bradenton, Florida 34205 2. Principal Place of Business 3. Mailing Address 1111 - 9th Avenue West Post Office Box 9335 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite "B" City & State City & State 4. FEI Number Applied For Bradenton, Florida Not Applicable Bradenton, Florida 65-1060039 Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 34205 34206 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DONALD W. YETTER Street Address (P.O. Box Number is Not Acceptable) 1111 - 9th Avenue West, Suite "B" Bradenton, Florida 34205 City Zip Code ity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named & SIGNATURE (NOTE: Registered Agent signature required when reinstating) FEE IS \$50.00 Make Check Payable to Department of State MANAGING MEMBERS/MEMBERS ADDITIONS/CHANGES 10. Manager ☐ Change TITLE TITLE Addition NAME NAME John C. Manson STREET ADDRESS STREET ADDRESS 1111 - 9th Avenue West, Suite "A" CITY-ST-ZIP CITY-ST-ZIP Change TITLE Addition Manager ☐ Delete TITLE NAME NAME Donald W. Yetter STREET ADDRESS STREET ADDRESS 100003768751--3 -02/26/91--01150--020 1111 - 9th Avenue West, Suite "B" Bradenton, Florida 34205 CITY-ST-ZIP CITY-ST-ZIP . ****50.00 D##**50.4000 TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE 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-712 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. F SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE