FOR PROFIT CORPORATION

Jun 30, 2003 8:00 am UNIFORM BUSINESS REPORT (UBR) **Secretary of State** DOCUMENT # LD 2000031935 06-30-2003 90001 038 ****50.00 **FUTURITY INVESTMENTS, LLC** DO NOT WRITE IN THIS SPACE 10109204 3. Mailing Address 2. Principal Place of Business 1100 Pinellas Bayway 1100 Pinellas Bayway Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. H-1 H-1 Applied For City & State City & State 4. FEI Number 65-1162428 Tierra Verde, FL Tierra Verde, Fl. Not Applicable 33715 Country Country \$8.75 Additional 5. Certificate of Status Desired 33715 **Pinellas Pinellas** Fee Required 7. Name and Address of Current Registered Agent Name Jerry T. Ratledge DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1100 Pinellas Bayway, Unit H-1 Tierra Verde 6. The above named entity submits this statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Jerry T. Ratledge 4/21/03 (NOTE: Registered Agent eignature required when reinstating) 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS . 10. % TITLE CR2E0348 (12/02) TITLE Jerry T. Ratledge, Managing Member NAME NAME 1100 Pinellas Bayway, Unit H-1 STREET ADDRESS STREET ADDRESS Tierra Verde, FL 33715 CITY-ST-78 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE DRF IWAE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADVISES CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME HAME

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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Jerry T. Ratledge

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-7/P

TITLE

NAME

4/21/03

727-867-9116

Daytime Phone #