2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # L79452** INLETS & ASSOCIATES, INC. 04-30-2001 90346 026 ***150.00 Principal Place of Business Mailing Address 816 N. JEFFERSON AVENUE 816 N. JEFFERSON AVENUE CLEARWATER FL 33755 CLEARWATER FL 33755 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 59-3075741 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 VANDERVORT, MADISON-1002 DREW ST GLEARWATER FL 34615 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 (NOTE, Registered Agent's gnature 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. PD CR2E034 (10/00) TITLE ☐ Delete TITLE Change ☐ Addition BURNEY, HARRY W JR NAME NAME STREET ADDRESS 816 N JEFFERSON AVE STREET ADDRESS CITY-ST-ZIP CITY+ST-78P CLEARWATER FL 33755 TITLE Delete Addition TITLE Change BURNEY, ANTHONY S NAME NAME 1310 SPRUCE ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - Z!P SAFETY HARBOR FL 34965 TITLE ☐ Delete TITLE Change Addition BURNEY, DOROTHEA D NAME NAME STREET ADDRESS 1470 SPRINGDALE ST. STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP CLEARWATER FL 33755 TITLE TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IB TUTLE ☐ Delete TITLE Change Addition NAME MAME 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.

W.Burney Jr. 4-17-200 (727) 443-0195 SIGNATURE: