2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 19, 2000 8:00 am Secretary of State DOCUMENT # **M77690** FISTER MOVING AND STORAGE, INC. 05-19-2000 90065 017 ***150.00 Principal Place of Business Mailing Address 3725 FRONTAGE RD. N. 3725 FRONTAGE RD. N. LAKELAND FL 33810-2858 LAKELAND FL 33809 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 62-1350600 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BROWNING, RANDY Street Address (P.O. Box Number is Not Acceptable) 3725 FRONTAGE RD. N. LAKELAND FL 33809 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 it applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. * FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Delete TITLE X Change TITLE Vice President NAME (-FISTER: MICHAEL DUTCE TO NAME Michael Fister STREET ADDRESS STREET ADDRESS 2305 PALUMBO DR. 2305 Palumbo Dr., Lexington, KY 40509 CITY-ST-ZIP CITY-ST-ZIP LEXINGTON KY President ☐ Change TITLE TITLE Defete Randy Browning ... FISTER, KATHY NAME NAME STREET ADDRESS STREET ADDRESS 2305 PALUMBO DR. 3725 Frontage Rd., N CITY-ST-ZIP LEXINGTON KY CITY-ST-ZIP Lakeland, FL 33809 Secretary/Treasurer Change Addition ☐ Delete TITLE NAME Joe Warren STREET ADDRESS STREET ADDRESS 2305 Palumbo Dr. CITY-ST-ZIP CITY-ST-ZIP Lexington, KY 40509 Addition ☐ Delete ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition Change TITLE NAME 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.

Joe Warren Sec/Treas.

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: