2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am, Secretary of State DOCUMENT # N0000000674 05-16-2001 90361 037 ****61.25 TRI-COUNTY K-9 SEARCH TEAM, INC. Principal Place of Business Mailing Address 2120 N.E. VAN LOON TERR. 2120 N.E. VAN LOON TERR. CAPE CORAL FL 33909 CAPE CORAL FL 33909 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0970646 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KERSEY, LEE 2120 N.E. VAN LOON TERR. CAPE CORAL FL 33909 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be **FILE NOW:** Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Addition TITLE □ Delete TITLE NAME KERSEY, LEE NAME STREET ADDRESS 2120 N.E. VAN LOON TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33909 DKolb, AMY 204 FREL Avenue, North ☐ Addition TITLE 2 Delete TITLE GRIFFITH, SUSAN NAME NAME STREET ADDRESS STREET ADDRESS 2458.DANDO_ST. . ---FORT Myers, FL 33971 CITY-ST-7IP CITY-ST-ZIP PT. CHARLOTTE FL 33948 TITLE Delete TITLE Taylor, Andrea Avenue TAYLOR, ANDREA NAME NAME STREET ADDRESS STREET ADDRESS 4015 S.W. 29TH AVE. Cape Coral, FL 33914 CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33914 ☐ Change ☐ Addition TITLE ☐ Delete TITLE KERSEY, CHARLES NAME NAME STREET ADDRESS STREET ADDRESS 2120 N.E. VAN LOON TERR. CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33909 ☐ Change ☐ Addition Delete TITI F TITLE NAME CANFIELD, JOE NAME STREET ADDRESS STREET ADDRESS 8420 BESSMER AVE. CITY-ST-ZIP CITY-ST-ZIP NORTH PORT FL 34287 ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

*941-277-073*0

FILED