2004 NOT-FOR-PROFIT CORPORATION

| ~20 | 04 NOT-FOR-PRO AMENDED AN | OFIT CORPOI NUAL REPO | | APPHOVEL | | | |
|--|--|---|--|--|--|--|--|
| 1. Entity Nam | MENT # N0100003 | _ | | | 05 AUG 1-2 PM 2 | 2: 56 | |
| Principal Plan 10835 SW 8 GAINESVILLE | 3RD PLACE | Mailing Address 10835 SW 83RD PLACE GAINESVILLE, FL 32608 | | | SECRETARY OF ST TALLAHASSEE, FLO | TATE RIĐA | |
| | lace of Business SW 83rd flace #, etc. | 3. Mailing Address 10819 S \(\omega 83 \) Suite, Apt. #, etc. | nd flace | | ORAND CREEKS | | |
| City & State Gainerrille FL 3 2609 Zip Country | | City & State Cassaville FL Zip Country 3,2608 USA | | 4. FEI Number 20-029211 | Olig-III Olizzoon (10/00) | | |
| 3260 | 6. Name and Address of Current F | 32608 | USP | | atus Desired | e Required | |
| SMITH, JA 10835 SW GAINESVI | MES | negistered Agent | | Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | (0.8. | - M | <u> </u> | Zip Code | |
| 8. The above | named entity submits this statement for | The purpose of changing its re | egistered office or | registered agent, or both, in | | miliar with, and accept | |
| 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or primits name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) | | | | | | | |
| | | / | | | | | |
| -10.01 | Amended AR s \$61.25 | 9. Election Cam Trust Fund Co | ontribution. [| \$5.00 May Be Added to Fees | Make check Florida Departn | nent of State | |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS AND DIR OFFICERS AND DIR DP SMITH, JAMES 10835 SW 83RD PL. GAINESVILLE, FL 32608 | Trust Fund Co | ontribution. 11. TITLE NAME STREET ADDRESS | ADDITIONS/CHANG ADDITIONS/CHANG Pra Dictord Mickey Schasor 10819 Sty 83-d P | Florida Departn ES TO OFFICERS AND DIRE 1 | nent of State | |
| 10. TITLE NAME STREET ADDRESS | OFFICERS AND DIR DP SMITH, JAMES 10835 SW 83RD PL. | Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Added to Fees ADDITIONS/CHANG Pradicted Mickay Schacor | Florida Departm | CTORS IN 10 Change Addition Change Addition | |
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