2002 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED **DOCUMENT # N04121** Apr 18, 2002 8:00 am Secretary of State TALLAHASSEE INDUSTRIAL PARK PROPERTY OWNERS' ASS 04-18-2002 90395 046 ****61.25 Principal Place of Business Mailing Address PO BOX 37423 C/O CAROLYN PIPPENGER TALLAHASSEE FL 32315-7423 PO BOX 37423 TALLAHASSEE FL 32315-7423 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 58-1124521 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 Street Address (P.O. Box Number is Not Acceptable) PIPPENGER, CAROLYN 1486 MAX DR TALLAHASSEE FL 32303 City Zip Code FL 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. AND WARRIES HIS CON-Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change · Addition PIPPENGER, CAROLYN NAME NAME STREET ADDRESS 1486 MAX DR STREET ADDRESS CITY-ST-7IP Tallahassee Fl CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition DAMPIER, DAVID NAME NAME STREET ADDRESS 3465 GARBER DRIVE STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32303 CITY-ST-ZIP D -_---Delete -TITLE ☐ Change ☐ ☐ Addition PULSIFER, DAVE NAME NAME STREET ADDRESS 1491 CLARK DRIVE STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32303 CITY-ST-ZIP TITLE **X** Delete TITLE Addition □ Change mikeBrown Neal. Bill NAME NAME 3416 Garber Dr STREET ADDRESS 3452 GARBER DR STREET ADDRESS CITY-ST-ZIP Tallahassee fl CITY-ST-ZIP Tallahassee, PL 32303 TITLE □ Delete TITLE ☐ Change ☐ Addition NAME Fairchild, dan NAME STREET ADDRESS 3673 PEDDIE DRIVE STREET ADDRESS CITY-ST-7IP TALLAHASSEE FL 32303 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BETTINGER, MIKE NAME NAME 3440 Garber Dr STREET ADDRESS STREET ADDRESS CITY-ST-7IP TALLAHASSEE FL 32303 CITY-ST-ZIP 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

DCarolyn E. Pippenger, Tres