2003 NOT-FOR-PROFIT CORPORATION Apr 23, 2003 8:00 am 3 Secretary of State **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # NO5514 1. Entity Name 04-23-2003 90274 037 ****61.25 HURRICANE HUNTERS, INC. Principal Place of Business Mailing Address % FITZSIMMONS, ROBERT J., JR. % FITZSIMMONS, ROBERT J., JR. 2818 CEDAR CREST DRIVE 2818 CEDAR CREST DRIVE **ORANGE PARK FL 32073 ORANGE PARK FL 32073** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-2477770 Not Applicable Zip Country 7ip 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 FITZSIMMONS, ROBERT J. JR. Street Address (P.O. Box Number is Not Acceptable) 2818 CEDAR CREST DRIVE **ORANGE PARK FL 32073** 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE 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 Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE ☐ Change ☐ Addition TITLE FITZSIMMONS, ROBERT J.JR. NAME NAME 2818 SEDAR CREST DR STREET ADDRESS STREET ADDRESS CR2E037 ORANGE PARK FL City-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SIRCH, RICHARD W.F. NAME NAME 2805 CEDAR CREST DR STREET ADDRESS STREET ADDRESS ORANGE PARK FL CITY-ST-7IP CITY-ST-ZIP = □ Delete TITLE ☐ Change TITLE ☐ Addition REYNOLDS, WILLIAM I. NAME NAME RR 1, BOX 550 A STREET ADDRESS STREET ADDRESS CRESCENT CITY FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition KEATING, ARTHUR L. NAME NAME 4341 VERONA AVE. STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FRY, THEODORE MAME 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 redever or trustee empowered besecute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

118 SPRUCY RIDGE RD. PVT DR.

MOUNTAIN CITY TN 37683

PARHAM, GERLAD

MIDDLEBURG FL

2577 HALPERNS WAY

21 APR 2003

904 764 6078

☐ Change

☐ Addition