2001 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE:

May 14, 2001 8:00 am Secretary of State **DOCUMENT # N21334** YULEE LION'S CLUB, INC. 05-14-2001 90240 036 ****61.25 Principal Place of Business Mailing Address US HIGHWAY 17 NORTH US HIGHWAY 17 NORTH P.O. BOX 321 P.O. BOX 321 C0064715 YULEE FL 32097 YULEE FL 32097 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-6151402 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent -Street Address (P.O. Box Number is Not Acceptable) HALL, EUGENE F. 1442 HALLS LN YULEE FL 32097 Zip Code City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition Change TITLE TITLE ☐ Delete STEWART, THOMAS J. NAME MAME STREET ADDRESS 458 HARRY GREEN RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YULEE FL ☐ Addition TITLE Change Delete TITLE HALL, DONALD A NAME NAME 1466 HALLS LN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YULEE FL 32097 ☐ Change ☐ Addition ☐ Delete TITLE TITLE HALL, EUGENE F NAME NAME STREET ADDRESS 1442 HALLS LN STREET ADDRESS CITY-ST-ZIP YULEE FL 32097 CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE HALL, FRANKIE E NAME NAME STREET ADDRESS 1442 HALLS LN STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP YULEE FL 32097 ☐ Change ☐ Addition ☐ Delete TITLE ELMER A. MURRAY NAME NAME STREET ADDRESS 2066 DELENE RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YULEE FL 32097 TITLE ☐ Change ☐ Addition ☐ Delete HALL, EARE L NAME STREET ADDRESS 1442 HALLS LN STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YULEE FL 32097 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

SIGNAFIERE SETTIES 4-39-01 9-4 225-5413
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date