FILED
Jul 14, 2003 8:00 am
Secretary of State
07-14-2003 90329 001 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N22830

1. Entity Name
3325, INC.

10109950

Principal Place of Business	Mailing Address
11403 PALMETTO BLVD. 3 TURKEY CREEK ALACHUA, FL 32615 US	3 TURKEY CREEK ALACHUA, FL 32615 US

[redacted]

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
11403 PALMETTO BLVD.	#9 TURKEY CREEK
Suite, Apt. #, etc.: 411 TURKEY CREEK	Suite, Apt. #, etc.:
City & State: ALACHUA, FL	City & State: ALACHUA, FL
Zip: 32615 Country: USA	Zip: 32615 Country: USA

4. FEI Number 59-3496215 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RITCH, SANFORD E., JR.
11403 PALMETTO BLVD.
ALACHUA, FL 32615

7. Name and Address of New Registered Agent

Name: ROBERT E CHRISTENSEN
Street Address (P.O. Box Number is Not Acceptable): 11403 PALMETTO BLVD 411 TURKEY CREEK
City: ALACHUA FL Zip Code: 32615

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: Robert E Christensen (Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent's signature required when reinstating) DATE: July 9 2003

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TUCKER, CONNIE W 11401 PALMETTO BLVD ALACHUA, FL 32615	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HICKS, BETTY 6910 NW 107TH LANE ALACHUA, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP 11405 PALMETTO BLVD. ALACHUA, FL 32615	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD POOLE, VIVIAN 11407 PALMETTO BLVD. ALACHUA, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRES. BERNADINE M. TUCKER #9 TURKEY CREEK 11401 PALMETTO BLVD. ALACHUA, FL 32615	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC. ROBERT CHRISTENSEN 11403 PALMETTO BLVD. ALACHUA, FL 32615	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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.

SIGNATURE: Bernadine M. Tucker 7/8/03 -386-462-2748
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #