2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000000098

May 21, 2001 8:00 am Secretary of State 05-21-2001 90039 015 ****70.00 SOUTHERN OCEANS ARCHAEOLOGICAL RESEARCH, INC. Principal Place of Business Mailing Address P.O. BOX 13512 658836 1205 MALDONADO DRIVE PENSACOLA FL 32591 PENSACOLA BEACH FL 32561 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3185783 Not Applicable \$8.75 Additional Country Zin Country Zio 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FRANKLIN, MARIANNE 1205 MALDONADO DRIVE PENSACOLA BEACH FL 32561 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. DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (10/00)Delete Change x Addition TITLE DETSY CARLSON TITLE MORRIS. III J NAME PO BOX 13512 STREET ADDRESS STREET ADDRESS 2842 COASTAL HWY **CR2E037** PLEASE PENSACOLA, FL 32591 CITY-ST-ZIP CITY-ST-ZIP ST. AUGUSTINE FL 32095 DELETE Delete ☐ Addition TITLE TITLE D, V WEINSTEIN, ERI NAME WEINSTEIN, ERI -- -NAME STREET ADDRESS STREET ADDRESS 2001 CHERRYWOOD 2001 CHERRYWOOD CITY-ST-ZIP CITY-ST-ZIP **AUSTIN TE 78722** AUSTIN, TX 78722 ☐ Addition TITLE ☐ Delete TITLE RODERICK, MATHER NAME MATHER, I. RODERICK NAME STREET ADDRESS UNIVERSITY OF RHODE ISLAND STREET ADDRESS U OF RHODE ISLAND, KINGSTO CITY-ST-ZIP KINGSTON RI 02881 CITY-ST-ZIP KINGSTON, RI 02881 TITLE ☐ Delete TITLE ☐ Addition FRANKLIN, MARIANNE NAME NAME 1205 MALDONADO STREET ADDRESS STREET ADDRESS FRANKLIN, MARIANNE CITY-ST-ZIP CITY-ST-ZIP PENSACOLA BEACH FL 32561 1205_MALDONADO TITLE PENSACOLA BEACH, FL 3256 Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

May

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