2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 AM
Secretary of State

DOCUMENT# N95000004894

Entity Name: CENTRAL FLORIDA DIAMONDBACKS, INCORPORATED

Current Principal Place of Business:

14850 ANGUS ROAD
POLK CITY, FL 33868

New Principal Place of Business:

Current Mailing Address:

14850 ANGUS ROAD
POLK CITY, FL 33868

New Mailing Address:

FEI Number: 59-3342071 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RICE, DONALD
14850 ANGUS ROAD
POLK CITY, FL 33868 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RICE, DON,
Address: 14850 ANGUS ROAD
City-St-Zip: POLK CITY, FL 33868

Title: STD ( ) Delete
Name: RICE, PATTY,
Address: 14850 ANGUS ROAD
City-St-Zip: POLK CITY, FL 33868

Title: SD ( ) Delete
Name: SHIRAH, LIZ,
Address: 105 HALES ROAD
City-St-Zip: AUBURNDALE, FL 33823

Title: PD ( ) Delete
Name: SHIRAH, LLOYD R.,
Address: 105 HALES ROAD
City-St-Zip: AUBURNDALE, FL 33823

Title: CD (X) Delete
Name: GRAHAM, RICHARD
Address: 1800 ALAMANDA DRIVE
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATTY RICE STD 01/30/2002
Electronic Signature of Signing Officer or Director — Date