2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N96000002649 FILED 1. Entity Name 02 OCT 15 PH 1:31 **VOLUSIA SEA TURTLE SOCIETY, INC.** Principal Place of Business SECRETARY OF STATE Mailing Address TALLAHASSEE, FLORIDA 340 N CAUSEWAY P.O. BOX 2524 NEW SMYRNA BEACH FL 32169 NEW SMYRNA BEACH FL 32170 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3403117 Not Applicable Zip Country Zip 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 Name Street Address (P.O. Box Number is Not Acceptable) STORCH, GLEN D 1620 S CLYDE MORRIS BLVD. SUITE 300 DAYTONA BEACH FL 32119 City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) DATE After September 13, 2002, 9. Election Campaign Financing \$5.00 May Be Make Check Payable to min. will be \$236.25." Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Addition MARSHALL, MARYE NAME NAME STREET ADDRESS 109 ESTHER STREET STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change DENNIS, CLAUDIA NAME STREET ADDRESS 309 NORMANDY AVENUE STREET ADDRESS CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 CITY-ST-ZIP TITLE D Delete ☐ Change ☐ Addition NAME LUX. ANDREA NAME STREET ADDRESS 1304 N PENINSULA AVE STREET ADDRESS CITY - ST-ZIP NEW SMYRNA BEACH FL 32169 CITY-ST-ZIP Marion Reinsema TITLE Delete TITLE ☐ Change ☐ Addition NAME 301 S. Pine Street NAME STREET ADDRESS STREET ADDRESS New Smyrnaßeach, Florida 32169 CITY-ST-7IP CITY-ST-ZIP Director TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 9 September 2002 386.423.4278



Virgil D. Pizer Chairman

October 8, 2002

Via USPS certified mail: 7099 3400 0015 2830 4502

Division of Corporations P.O.B. 1500 Tallahassee, FL 32302-1500

SUBJECT:

AMENDED UBR

ATTN:

Division of Corporations

I was originally instructed by your office on September 17, 2002 to file my amended UBR with information in the following blocks ONLY: BLK 1 & BLK 11 and to annotate the UBR with "AMENDED UBR".

It was returned (see enclosed letter). I have now been instructed to enter information in BLK's 4 & 7 and return for processing (amended UBR enclosed).

The UBR for Patriot Aviation Services, Inc., is current and was filed on March 3, 2002.

THIS IS AN AMENDED UBR WITH CHANGES TO BLK 11 "OFFICERS AND DIRECTORS" AS INDICATED.

THE FEE PREVIOUSLY ENLOSED AND RETAINED BY THE FLORIDA DEPARTMENT OF STATE WAS \$70.00 (\$61.25-AMENDED UBR & \$8.75 CERTIFICATE OF STATUS).

PLEASE PROCESS ACCORDINGLY.

If you should require any additional information, please do not hesitate to contact me at the number below.

Best regards.

P.O.B 21784, FT. Lauderdale, FL, 33335-1784; Tel - 954.462.6040, Fax - 954.462.6040