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2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9600004524 MILLION MAN ORGANIZATION OF NORTHWEST FLORIDA, I 00 OCT 12 AM 7: 14 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 547 BOB WHITE COURT 547 BOB WHITE COURT PENSACOLA FL 32514 PENSACOLA FL 32514 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE ---Suite, Apt. #, etc._--Applied For City & State 4. FEI Number City & State 59-3352089 Not Applicable Country \$8.75 Additional 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) MCKENZIE, GERALD ESQ. 2532 NORTH 12TH AVENUE PENSACOLA FL 32503 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 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Department of State After September 13, 2000 min. will be \$236.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (2,00)Change ☐ Addition TITLE ☐ Delete TITLE MCINTOSH, JERRY NAME NAME CR2E037 547 BOB WHITE COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32514 CITY-ST-7IP Vice-Prosident Change ☐ Addition TITLE TITLE ■ Delete BLACKMON, JOHNNY W NAME Lerroy Boyd NAME 547 BOB WHITE COURT STREET ADDRESS STREET ADDRESS 08 Hunt CITY-ST-ZIP PENSACOLA FL 32514 CITY-ST-ZIP sacola TITLE ☐ Change ☐ Addition ☐ Delete TITLE MITCHELL, JAMES NAME NAME STREET ADORESS 2324 GREENWELL COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL Change ☐ Addition TITLE ☐ Delete TITLE DAVIS, LENORE NAME NAME STREET ADDRESS STREET ADDRESS 1740 KNIGHT DRIVE CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL ■ Addition ☐ Change TITLE ☐ Delete TITLE MCINTOSH, CAROL NAME NAME 547 BOGWHITE COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL TITLE ☐ Delete ☐ Change ☐ Addition HUDSON, DONALD NAME NAME **581 PHEASANT COURT** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

SIGNATURE:

PENSACOLA FL