2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 11, 2000 08:00 AM DOCUMENT # N9900006693 1. Entity Name **Secretary of State** OUT OF EXILE, INC. Principal Place of Business Mailing Address 409 DOROTHY CIRCLE 409 DOROTHY CIRCLE EUSTIS FL FL 32726 32726 2. Principal Place of Business 3. Mailing Address PO BOX 140422 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ORLANDO FL 59-3610622 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JORDAN 13543 EAST HWY. 50 Street Address (P.O. Box Number is Not Acceptable) CLERMONT FL. 34711 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. SIGNATURE TAMMY LYNN DAHL 04/11/2000 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ญ็หญ่≥าเก็ ก็เรียกได้ FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE ☐ Addition NAME FAIRBROTHERS LARRY NAME FAIRBROTHERS LARRY DIR STREET ADDRESS 409 DOROTHY CIRCLE STPEET ADDRESS 409 DOROTHY CIRCLE CITY-ST-ZIP EUSTIS FL32726 CITY-ST-ZIP **EUSTIS** FL32726 TITLE ☐ Delete D | Change ☐ Addition NAME GEORGE NAME GEORGE MARK MARK DIR STREET ADDRESS 409 DOROTHY CIRCLE STREET ADDRESS 409 DOROTHY CIRCLE CITY-ST-ZIP **EUSTIS** 32726 CITY-ST-ZIP **EUSTIS** 32726 TITLE ☐ Delete TITLE X Change Addition NAME NAME DOHL TAMMY DAHL TAMMY LPRES STREET ADDRESS 409 DOROTHY CIRCLE 409 DOROTHY CIRCLE STREET ADDRESS CITY-ST-ZIP **EUSTIS** FL. 32726 CITY-ST-ZIP EUSTIS \mathbf{FL} 32726 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME BARNES RUSS BARNES RUSS CHAIR STREET ADDRESS 409 DOROTHY CIRCLE STREET ADDRESS 409 DOROTHY CIRCLE CITY-ST-ZIF **EUSTIS** 32726 CITY-ST-ZIP **EUSTIS** 32726 TITLE ☐ Delete TID F Change ☐ Addition NAME NAR/F STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change | ☐ Addition NAME STREET ADDRESS

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^{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.