NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
02 SEP 23 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT #

1. Entity Name P00000038152

Scott Palmer Holdings, Inc.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
3883 Rogers Bridge Rd.	Same
Suite, Apt. #, etc.: Suite 703	Suite, Apt. #, etc.
City & State: Duluth, Georgia	City & State
Zip: 30097 Country: USA	Zip Country

4. FEI Number 65-0991759 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: H. P. Jolly, Jr.

Street Address (P.O. Box Number is Not Acceptable): 250 West Seaview Circle

Suite 703

City: Duck Key FL Zip Code: 33050

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: H. P. Jolly, Jr. Sept 15 '02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE	Secretary
NAME	H. P. Jolly Jr.
STREET ADDRESS	3883 Rogers Bridge Rd., Ste.703
CITY-ST-ZIP	~~Duluth, Georgia 30097~~
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	President
NAME	Warren S. Jolly
STREET ADDRESS	3883 Rogers Bridge Rd.,Ste. 703
CITY-ST-ZIP	Duluth, Georgia 30097
TITLE	
NAME	
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: H. P. Jolly, Jr. Sept 15 '02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ad 9/23/02