2002 UNIFORM BUSINESS REPORT (UBR)

Jul 23, 2002 8:00 am DOCUMENT # P00000043252 **Secretary of State** 1. Entity Name 07-23-2002 90346 008 ***150 BAYSIDE SHIRT COMPANY Mailing Address Principal Place of Business 4786A WOODLANE CIRCLE P.O. BOX 98 R0131645 TALLAHASSEE FL 32303 PANACEA FL 32346 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3652666 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MCDONALD, ROBERT B Street Address (P.O. Box Number is Not Acceptable) 195 MASHES SAND RD PANACEA FL 32346 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Change ☐ Addition TITLE ☐ Delete TITLE NAME MCDONALD, RUBERT B NAME MC DONALD ROBERT B STREET ADDRESS 195 MASHES GRAND ROAD STREET ADDRESS 195 MASHES SAND ROAD CITY-ST-ZIP PANACEA FL 32346 CITY-ST-7IP PANACEA, FL. 32346 TITLE VPS □ Delete **VPS** NAME WELLS, BRIAN WIELLS, BRIAM STREET ADDRESS 5485 PEDRIEK CROSSING STREET ADDRESS 314 BRAVADO LANE CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32303 PALM BEACH SHORES ☐ Addition ☐ Defete TITLE TITLE **VPM** NAME NAME MCDONALD, MARK B STREET ADDRESS STREET ADDRESS 3603-BUCKNER:COURT- -CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32313 TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

CITY-ST-ZIP

CITY-ST-ZIP

Date

Daytime Phone #

FILED

CR2E034 (4/02)