WT-894-2272

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE

Mar 28, 2001 8:00 am DOCUMENT # P0000062588 **Secretary of State** 1. Entity Name TATHALL, INC. 03-28-2001 90207 017 ***150.00 Principal Place of Business Mailing Address 1331 SPOKANE AVE. 1331 SPOKANE AVE. ORLANDO FL 32803 ORLANDO FL 32803 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 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 FILER, SHERRY L Street Address (P.O. Box Number is Not Acceptable) 1331 SPOKANE AVE. ORLANDO FL 32803 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 11. 12, TITLE Delete DREGIOEINT RED TATTERSALL FILER, SHERRY L NAME STREET ADDRESS 1331 SPOKANE AVE. STREET ADDRESS 333 N FERNOREEK AU. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 RLANDO, FLA 32303 PRESIDENT TITLE X Delete TITLE EORETARY NAME WILLIAM HALL NAME RED TATTERSAL STREET ADDRESS STREET ADDRESS 333 N. FERNOREEK AV. CITY-ST-ZIP -CITY-ST-ZIP DEORGETOWN, FLA TRKANDO, FLA 32803 TITLE *うだる ロミエル*ダイ TITLE ICKE PRIES. NAME NAME CIMDY HALL SHERRY L FILER STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BEORGE TOWN, FLA CITY-ST-7IP VICE PRES TITLE TITLE NAME NAME ERED TAITERSAL STREET ADDRESS STREET ADDRESS N FERNCREEK AU CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

TATTERSALL