2001 UNIFORM BUSINESS REPORT (UBR)

PRINTED NAME OF SIGN

Mar 16, 2001 8:00 am DOCUMENT # P0000067473 **Secretary of State** 1. Entity Name F.M. HAMILTON INVESTMENTS, INC. 03-16-2001 90035 029 ***150.00 Mailing Address Principal Place of Business 255 S ORANGE AVE. STE 1255 255 S ORANGE AVE. STE 1255 ORLANDO FL 32901 ORLANDO FL 32801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3692622 Applied For City & State City & State 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 200 all BEVERLY, WILLIAM A S. Box Number is 255 S ORANGE AVE, STE 1255 ORLANDO FL 32801 8. The above named entity submits this starting ase of changing its registered office or registered agent, or both, in the State of Florida. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 11. 12. President ☐ Delete TITLE ☐ Change TITLE LINTON, JANE H NAME NAME STREET ADDRESS STREET ADDRESS 2001 BROWNING AVE CITY-ST-ZIP CITY-ST-7IP SALT LAKE CITY UT 84106 ☐ Change TITLE Delete TITLE NAME PETERSON, MARILYN H NAME STREET ADDRESS STREET ADDRESS 3069 CORRIGAN CANYON CITY-ST-ZIP CITY-ST-7/P SALT LAKE CITY UT ☐ Change - ☐ Addition TITLE Dēlete" TITI F NAME IVANCOVICH, JOYCE H NAME STREET ADDRESS STREET ADDRESS 342 RUMA RANCHO CITY-ST-ZIP CITY-ST-ZIP PORTERVILLE CA 93257 Change Addition TITL F TITLE ☐ Delete NAME NAME HAMILTON, FINLEY M STREET ADDRESS STREET ADDRESS 255 S ORANGE AVE, STE 1255 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 Delete TITLE Change ☐ Addition TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.