2001 UNIFORM BUSINESS REPORT (UBR)

Sep 12, 2001 8:00 am Secretary of State P00000076490 DOCUMENT # 1. Entity Name 09-12-2001 90106 042 ***150.00 R V EXPORTS, INC. Principal Place of Business Mailing Address JANE T. WINN JANE T WINN 11731-1 PHILLIPS HIGHWAY 11731-1 PHILLIPS HIGHWAY JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 367066 City & State City & State Applied For Not Applicable 5. Certificate of Status Desired - S8.75 Additional Fee Required Zip~ -Country---Country 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WINN, JANE T Street Address (P.O. Box Number is Not Acceptable) 11731-1 PHILLIPS HIGHWAY JACKSONVILLE FL 32256 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, 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 \$5.00 May Be 10. Election Campaign Financing After September 12, 2001 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 PRESIDENT CR2E034 (5/01) ☐ Delete TITLE TITLE BERNARR R. SARGEANT 11781-1 PHILLIPS HWY WINN, JANE T NAME NAME 11731-1 PHILLIPS HIGHWAY STREET ADDRESS STREET ADDRESS INSKSONVILLE FL. 32256 JACKSONVILLE FL 32256 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

SIGNATURE:

TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Date Daytime Phone #

FILED

OHOCHMENT DOC# POODOOO 710490



Uniform Business Report Division of Corporations P. O. Box 1500 Tallahassee, Fl 32302 Sept 10 2001

Dear Sirs/Madam,

We have just received this second UBR. When I contacted your office I was told to send this letter explaining that both my self and Jane T. Winn, are frequently abroad and did not receive the first UBR.

I enclose the completed 2001 UBR and our cheque for US\$ 150.00

Yours Faithfully,

Bernart R. Sargeant

President.

RV Exports Inc

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