2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 15, 2002 8:00 am Secretary of State P00000083457 DOCUMENT # 1. Entity Name BECKETT LAKE, INC. 05-15-2002 90106 040 ***150.00 Mailing Address Principal Place of Business 2901 RIGSBY LANE 2901 RIGSBY LANE SAFETY HARBOR FL 34695 SAFETY HARBOR FL 34695 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3682648 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FORLIZZO, ROBERT A Street Address (P.O. Box Number is Not Acceptable) 2903 RIGSBY LANE SAFETY HARBOR FL 34695 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 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 11. OFFICERS AND DIRECTORS Change TITLE ☐ Delete TITLE CONNOR, MICHEAL NAME NAME 2901 RIGSBY LANE STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL 34695 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE KIDMAN, GEORGE K NAME NAME STREET ADDRESS 2901 RIGSBY LANE STREET ADDRESS CITY-ST-7IP SAFETY HARBOR FL 34695 CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME TWAGNER, MICHEAL NAME 2901 RIGSBY LANE STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL 34695 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE itones, bridget NAME NAME 2901 RIGSBY LANE STREET ADDRESS STREET ADDRESS Safety Harbor FL 34695 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE 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

TITLE NAME STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

☐ Delete

Change

Addition