2001 UNIFORM BUSINESS REPORT (UBR)

Feb 27, 2001 8:00 am Secretary of State DOCUMENT # P0000087070 PROTEGRITY AGENCY INC. 02-27-2001 90352 038 ***158.75 Principal Place of Business Mailing Address 280 WEKIVA SPRINGS RD 280 WEKIVA SPRINGS RD UUUMUA~ LONGWOOD FL 32791 LONGWOOD FL 32791 2. Principal Place of Business 3. Mailing Address P.O. Box 913100 280 Wekiva Springs Road Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3670118 Applied For Longwood, FL FLLongwood, Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32791 32779 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST TALLAHASSEE FL 32301 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITI F Change ☐ Addition NAME ROBERTS, D. GENE STREET ADDRESS STREET ADDRESS 280 WEKIVA SPRINGS RD CITY-ST-ZIP CITY-ST-ZIP LONGWOOD_FL_32791 Secretary TITLE ☐ Delete X7 Addition TITLE ☐ Change NAME Larry J. Kaczmarek NAME STREET ADDRESS STREET ADDRESS 280 Wekiva Springs Rd CITY-ST-ZIP CITY-ST-ZIP Longwood, FL 32779-TITLE ☐ Delete TITLE ☐ Change Treasurer X Addition NAME NAME Larry J. Kaczmarek STREET ADDRESS STREET ADDRESS 280 Wekiva Springs Rd CITY-ST-ZIP CITY-ST-ZIP Longwood, FL 32779 TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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 C!TY-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

Larry J. Kaczmarek

& Treasurer

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

FILED