## FILED 2003 FOR PROFIT CORPORATION Apr 28, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR P01000075025 DOCUMENT # 1. Entity Name 04-28-2003 91466 021 \*\*\*150.00 MERCURY GROUP, INC. Mailing Address Principal Place of Business 13577 FEATHER SOUND DR., STE. 690 13577 FEATHER SOUND DR., STE, 690 CLEARWATER FL 33762 CLEARWATER FL 33762 2. Principal Place of Business 3. Mailing Address 1901 Ulnerton 1901 41m4 ton Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES SixTh Sixth Clearwater City & State Clearwater Applied For 4. FEI Number 59-3735016 Not Applicable 33762 \$8.75 Additional 5. Certificate of Status Desired 33762 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DOUGHERTY, JACK Street Address (P.O. Box Number is Not Acceptable) 13577 FEATHER SOUND DR., STE. 690 1901 Ulmerton Road, Sixth **CLEARWATER FL 33762** City Clear water 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE TITLE Delete JOSEPH, GEORGE NAME NAME 13577 FEATHER SOUND DR., STE. 690 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 33762** CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE D TIRADOR, GABE NAME NAME STREET ADDRESS 13577 FEATHER SOUND DR., STE. 690 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33762 D --- ---TITLE ---Delete ---TITLE-\_\_\_\_ Change \_\_\_\_ Addition -NAME DOUGHERTY, JACK NAME STREET ADDRESS 13577 FEATHER SOUND DR., STE. 690 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33762** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 10 or Block 11 if changed, or on an attachment with an address, with all other like

SIGNATURE:

Daytime Phone #