2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # P02000129508 1. Entity Name FLORIDA BOATING & FISHING ASSOCIATION. 03 SEP 18 AM 9: 11 Principal Place of Business Mailing Address 2016 DELTA BOULEVARD 2016 DELTA BOULEVARD TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303 2. Principal Place of Business 3. Mailing Address Sulte, Apt. #, etc. Suite. Apt. #. etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THOMPSON, CLAYT. 2016 DELTA BOULEVARD Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE, FL 32303 City Zip Code a. 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 tide if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UER IS \$61.25 Make Check Payable to Florida Department of State \$5.00 May Be 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Addition CHZE034 (10/02) ☐ Change LAUGHON, TOM NAME NAMÉ 2016 DELTA BOULEVARD STREET ADDRESS STREET ADDRESS TALLAHASSEE, FL 32303 CITY-ST-ZP COY-ST-ZIP STD TITLE ☐ Delete TITLE ☐ Change ☐ Addition THOMPSON, CLAYT NAMÉ NAME STREET ADDRESS 2016 DELTA BOULEVARD STREET ADDRESS TALLAHASSEE, FL 32303 CITY-ST-2P CITY-ST-ZIP TITLE TITLE □ Cheone ☐ Delete Addition Addition NAMÉ NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZP CITY-ST-ZIP 1111 F ☐ Delete TITLE Change ■ Addition 000023166510 09/18/03--01021--002 **15 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P COY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ■ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP

12. I hereby certify that the information supplied with this fitting does not qualify for the exemption stated in Section 119.07(3XI), 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 empowered.

SIGNATURE: <

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Davime Phone 4

We did not receive the UBR for De Flutida Booting and Fishing Associations for the year 2003

214, 1000 2. Thompsond 5TD