2006 FOR PROFIT CORPORATION **FILED** ANNUAL REPORT (AR) Jan 23, 2006 08:00 AM CUMENT # P03000132320 **Secretary of State** CATLIN, INC. al Place of Business Mailing Address 9063 HARDWOOD LN. HASSEE FL 32311 TALLAHASSEE FL 32311 cipal Place of Business 3. Mailing Address te, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) v & State City & State Applied Far 4. FEI Number 76-0747848 Not Applied Country Zio 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 REICHMAN, MICHAEL A 380 N. JEFFERSON ST. Street Address (P.O. Box Number is Not Acceptable) MONTICELLO FL 32344 City rappays named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and according to the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and according to the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and according to the purpose of changing its registered affice or registered agent, or both, in the State of Florida. Fobligations of registered agent. (NOTE: Registered Agent signature required when re-installing) Semajore, type-tior printed name of recistered agent and tipo if apopositie FILE NOW!!! FEE IS \$150.00 \$5.00 May : 9. Election Campaign Financing iter May 1, 2006 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees NECK Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PSD ☐ Detete ☐ Change ☐ #d---CATLIN, KIM NAME *U00000*0396253 9063 HARDWOOD LANE STREET ADDRESS 01/30/06-80002-005 150.00 TALLAHASSEE FL 32311 CITY-ST-ZIP ☐ Delete THE ☐ Change ☐ A6**** STREET ADDRESS CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ #1.111 STREET ADDRESS CITY-ST-ZIP Defete nn€ ☐ Change 🔲 ಕಿನನಾಣ NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE ☐ Change Adama NAME STREET ADDRESS CITY - ST- ZIP Delete Change ☐ A.₁₁....

Tereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information undered 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 direction the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 1 analysis.

CITY-ST-ZIP

STREET ADDRESS

MARKE

VATURE: Kim M. Catlin

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Kim M.

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