FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jan 25, 2002 8:00 am Secretary of State DOCUMENT # P08993 1. Entity Name BUFFALO ROCK COMPANY, INC. 01-25-2002 90025 042 ***150 00 Principal Place of Business Mailing Address % LARRY DUTTON % LARRY DUTTON P.O. BOX 10048 P.O. BOX 10048 **BIRMINGHAM AL 35202** BIRMINGHAM AL 35202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 63-0032365 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City 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, 2002 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Defete TITLE CR2E034 (9/01) ☐ Change ☐ Addition NAME LEE, JAMES C. III NAME STREET ADDRESS 111 OXMOOR ROAD STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME BARKER, ROGER D. NAME STREET ADDRESS STREET ADDRESS 111 OXMOOR RD CITY-ST-ZIE CITY-ST-7IP **BIRMINGHAM AL** TITLE Delete 😿 TITLE SD ☐ Change ☐ Addition NAME NAME ALLUMS, MARY B. STREET ADDRESS 111 OXMOOR ROAD STREET ADDRESS CITY-ST-ZIF **BIRMINGHAM AL** CITY-ST-ZIP SECRETARY TITLE ☐ Delete TITLE ☐ Change Addition NAME JAMIE LEE WINDHAM NAME STREET ADDRESS STREET ADDRESS 111 Ox MOOR Rd L 35209 CITY-ST-ZIP CITY-ST-ZIP BIRMING HAM, TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-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

1/8/02 dos 942343

Daytime Phone #