## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Aug 25, 2000 8:00 am Secretary of State DOCUMENT # P09426 ROSS SEMINOLE, INC. 08-25-2000 90006 002 \*\*\*158.75 Principal Place of Business Mailing Address RT 168 P O BOX 767 P O BOX 767 HIUUGIGUU: ASHLAND KY 41105-0767 ASHLAND KY 41105-0767 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 61-0997092 Not Applicable 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 GRIFFITHS, MORRIS L. Street Address (P.O. Box Number is Not Acceptable) 6995 NOVA ROAD ST. CLOUD FL 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) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition Delete TITLE GRIFFITHS. MORRIS L. NAME NAME STREET ADDRESS 1931 GREEN SPRINGER RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ASHLAND KY ☐ Addition ☐ Delete Change HALL, ELIZABETH NAME NAME STREET ADDRESS 1915 WILSHIRE BLVD. STREET ADDRESS CITY-ST-ZIP ASHLAND KY CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME -NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete 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 ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 of 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 changed, or on an attachment with an appears, with all other like empowered.

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

AHOChment LOCH: PUY426

## ROSS SEMINOLE, INC. P.O. BOX 767 ASHLAND, KENTUCKY 41105-0767 PHONE (606) 739-5139

August 22, 2000

Florida Department of State Katherine Harris Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: First Notice of 2000 Uniform Business Report Document # P09426

Please find enclosed a check in the amount of 158.75 for filing fees and the fee for a certificate of status.

We did not receive the first notice of uniform business report and we would appreciate your accepting this amount without the penalties due to our not receiving this notice.

If you have questions or need additional information, please feel free to give us a call.

Yours truly,

V

. Griffiths

MLG/dg