2000 UNIFORM BUSINESS REPORT (UBR)

THE BUDD GROUP, INC.						Feb 29, 2000 8:00 am Secretary of State 02-29-2000 90194 010 ***150.00						
incipal Place of Business - SOUTH STRATFORD ROAD		Mailing Address 2325 SOUTH STRATFORD ROAD WINSTON-SALEM NC 27103-6223										
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Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.										
					DO NOT WRITE IN THIS SPACE							
City & State		City & State			4. 1	El Number	56-0750470	 _	Ap	plied For)	
Zip Country		Zip Cour		utry	v				8.75 Add	t Applicable	1	
Zip							f Status Desired	<u>Г</u>	ee Require			
	6. Name and Address of Current	Registered Agent		Name		lame and A	Address of New Reg	istered A	jent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD					ss (P.O. B	ox Number	is Not Acceptable)					
PLAN	TATION FL 33324											
				City				FL	Zip Cod	Э		
Tax filling r	oration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW! After MAY 1, 20 Make Check Payab	00 Fee	will be \$550.0	State	Trus	tion Campaign Finar t Fund Contribution		Added	0 May Be to Fees		
	OFFICERS AND		12.		AE	DITIONS/C	CHANGES TO OFFIC				ła	
ADDRESS	CD . BUDD, RICHARD P. 2325 S. STRATFORD ROAD WINSTON-SALEM NC	☐ Delete							☐ Change	Addition	DOED A FORD	
ST-ZIP	VSTD CHRISCO, GERALD L. 2325 S STRATFORD RD. WINSTON-SALEM NC	☐ Delete	•			-			Change	∏ Addition	15	
AMOREGS ST ZIP	PD BUDD, JOSEPH R 2325 S STRATFORD RD WINSTON-SALEM NC	☐ Delete							Change	☐ Addition		
- 	VD JONES, MICHAEL 100 MEREDITH DRIVE, SUITE 15 DURHAM NC	□ Delete	4	1					Change	Addition		
ST-ZIP	DOTH PAN NO	☐ Delete	•	l l					☐ Change	Addition	1	
*pparag		☐ Delete	TITLI NAM STRE	E					Change	☐ Addition		

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 changed, or on an attachment with an address, with all other like empowered.

Kinco Gerald L. Chrisco MATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/00

336/765-7690

Daytime Phone #