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2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

13. I hereby certify that the information supplied indicated on this report or supplemental report

of the corporation or the receiver changed, or on an attachment wi

SIGNATURE:

Aug 31, 2001 8:00 am Secretary of State P23371 1. Entity Name J.F. DAY AND COMPANY, INC. 08-31-2001 90111 018 ***550.00 Principal Place of Business Mailing Address P.O. BOX 10368 P.O. BOX 10368 BIRMINGHAM AL 35202-7368 BIRMINGHAM AL 35202-7368 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 63-0055795 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** 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. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE (5/01)☐ Delete TITLE Change ☐ Addition NAME DAY, III, J. FRANK NAME STREET ADDRESS 2820 6TH AVENUE SOUTH STREET ADDRESS **CR2E034** CITY-ST-ZIP BIRMINGHAM AL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME EVANS, ROBERT B NAME STREET ADDRESS 2820 6TH AVENUE SOUTH STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP TITLE Delete TITLE STD ☐ Change ☐ Addition NAME DAY, JR., J.F. NAME STREET ADDRESS 2820 6TH AVENUE SOUTH ... STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

does not sualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if