2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P25152 Mar 10, 2000 8:00 am 1. Entity Name **Secretary of State** RGC (USA) MINERALS INC. 03-10-2000 90026 039 ***150.00 Principal Place of Business Mailirig Address 1223 WARNER RD 1223 WARNER RD GREEN COVE FL 32043 GREEN COVE FL 32043-4623 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2931722 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SCOTT, J.L. Street Address (P.O. Box Number is Not Acceptable) 1223 WARNER RD **GREEN COVE SPRINGS FL 32043** 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 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 TITLE Change Change Addition TITLE ☐ Delete SLOAN, G J NAME NAME STREET ADDRESS 1223 WARNER ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GREEN COVE SPRGS FL** ☐ Change Addition Delete TITLE TITLE BRINDLE, R.J. NAME STREET ADDRESS STREET ADDRESS 1223 WARNER ROAD CITY-ST-ZIP CITY-ST-ZIP GREEN COVE SPRG. FL Addition ☐ Change TITLE ☐ Delete SCOTT, JIMMIE L. NAME NAME STREET ADDRESS STREET ADDRESS 1223 WARNER ROAD CITY-ST-ZIP CITY-ST-ZIP GREEN COVE SPRG. FL Change Addition ☐ Delete TITLE SALE, ALLAN R NAME STREET ADDRESS STREET ADDRESS 12472 ST JOHN CHURCH RD CITY-ST-ZIP CITY-ST-ZIP STONY CREEK VA 23882-0129 ☐ Delete TITLE Change Addition TITLE NAME MCKENZIE, NEIL S NAME STREET ADDRESS STREET ADDRESS 1223 WARNER RD CITY-ST-ZIP CITY-ST-ZIP **GREEN COVE SPRINGS FL 32043** Change Addition TITLE ☐ Delete TITLE NAME Bryan Ellis NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 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.

D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

<u> 3-6-00</u>

Date

Daytime Phone #