FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 24, 2002 8:00 am Secretary of State P28256 DOCUMENT # 1. Entity Name DARCY HALL INC. 04-24-2002 90383 030 ***150 00 Principal Place of Business Mailing Address P.O. BOX 3480 3570 KEITH ST., N.W. **CLEVELAND TN 37312 CLEVELAND TN 37320-3480** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 01-0451526 Not Applicable Zip 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 Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition TITLE Change **PDT** Delete TITLE NAME LESTER, FRED L JR NAME STREET ADDRESS 7280 CABBAGE CREEK COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PONTE VEDRA BEACH FL Change ☐ Addition TITLE ☐ Delete NAME NAME JABALEY, CHARLES E STREET ADDRESS STREET ADDRESS 170 N. OCOEE STREET, SUITE 301 CITY-ST-ZIP CITY-ST-ZIP **CLEVELAND TN 37311** ☐ Addition ☐ Change ☐ Delete TITLE TITLE **AS** NAME CROSS, CINDY S NAME STREET ADDRESS STREET ADDRESS 3570 KEITH STREET, N.W. CITY-ST-ZIP CITY-ST-7IP **CLEVELAND TN 37312** ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME

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.

STREET ADDRESS CITY-ST-ZIP

Cindy's Cross, Assistant Secretary 4/15/02 423-473-5867 SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ATTACH # P28256/637520

3001 Keith Street, NW/P.O. Box 3480/Cleveland, Tennessee 37320-3480/(423) 472-9585

April <u>)</u>, 2002

VIA AIRBORNE EXPRESS

Florida Secretary of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

RE: Darcy Hall, Inc.

Dear Representative:

Enclosed herewith for your consideration and review is the completed Uniform Business Report for the above-referenced entity. Also, enclosed herewith is a check in the amount of \$150.00 which represents the necessary filing fees. If you should have any questions and/or need additional information, please contact me at (423) 473-5869.

Thank you in advance for your assistance in this matter.

Sincerely,

Leslie Ray

Legal Department

/lmr

Enclosures