2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: \(\times \)

Feb 19, 2001 8:00 am **DOCUMENT # P33017 Secretary of State** 1. Entity Name JIM PADGETT, INC. 02-19-2001 90052 029 ***150.00 Principal Place of Business Mailing Address 139 GLADES TURN 139 GLADES TURN PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL 32407 2. Principal Place of Business 3. Mailing Address 118 Grand Heron Dr. 118 Grand Heron Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 58-1402538 Panama City Beach, FL Panama City Beach, FL Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32407 32407 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name James R. Padgett PADGETT, JAMES R. Street Address (P.O. Box Number is Not Acceptable) 118 Grand Heron Dr. 139 GLADES TURN PANAMA CITY BEACH FL 32407 City Panama City Beach 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, 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. Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 12. 11. TITLE ☐ Delete ★ Change PADGETT, JAMES R. NAME NAME STREET ADDRESS STREET ADDRESS 139 GLADES TURN 118 Grand Heron Dr. CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL 32407 Panama City Beach, FL 32407 **X** Change ☐ Delete TITLE TITLE PADGETT, LOUISE M. NAME NAME STREET ADDRESS 118 Grand Heron Dr. STREET ADDRESS 139 GLADES TURN CITY-ST-ZIP Panama City Beach, FL 32407 CITY-ST-ZIP PANAMA CITY BCH FL 32407 TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE 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 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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.

FILED