FILED 2000 UNIFORM BUSINESS REPORT (UBR) Mar 07, 2000 8:00 am OCUMENT # **P37386** Secretary of State STRIPLING PROPERTIES, INC. 03-07-2000 90014 026 ***150.00 andipal Place of Business Mailing Address 2519 OVERLAKE LANE STREET, BOX 73 FL 32692 STOCKBRIDGE GA 30281-5240 C0020525 3. Mailing Address Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-1973246 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STRIPLING, J. DAVID Street Address (P.O. Box Number is Not Acceptable) CANAL STREET, BOX 73 SUWANNEE FL 32692 Zip Code City FL 3. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 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, 2000 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. CR2E034 (9/99 Change ☐ Addition ☐ Delete TITLE 17LE STRIPLING, KEITH W NAME IAME TREET ADDRESS 2580 BRUSHY NOB LANE STREET ADDRESS CITY-ST-ZIP TTY-ST-ZIP STOCKBRIDGE GA 30281 Change ☐ Addition TLE ☐ Delete TITLE STRIPLING, SARA J. NAME IAME STREET ADDRESS TREET ADDRESS 2519 OVERLAKE LANE CITY-ST-ZIP ITY-ST-ZIP STOCKBRIDGE GA 30281 ☐ Delete TITLE ☐ Change ☐ Addition ITLE LOWE, DEBBIE M. NAME AME TREET ADDRESS 805 GARDNER RD. STREET ADDRESS CITY-ST-ZIP ITY-ST-ZIP STOCKBRIDGE GA 30281 ☐ Delete TITLE ☐ Change ☐ Addition ITI F AME STRIPLING, DONNA LISA NAME STREET ADDRESS TREET ADDRESS 3816 LONDON DR. CITY-ST-ZIP ITY-ST-ZIP **DECATUR GA 30032** ☐ Delete ☐ Change Addition TITLE STRIPLING, J. DAVID NAME AME TREET ADDRESS **CANAL STREET BOX 73** STREET ADDRESS CITY-ST-7IP ITY-ST-ZIP SUWANNEE FL Change Delete TITLE ☐ Addition ITLE STRIPLING, KEVIN M. NAME AME TREET ADDRESS 2612 ABBEY RIDGE RD. STREET ADDRESS ITY-ST-ZIP **CONYERS GA 30208** CITY-ST-ZIP 3. 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.

SIGNATURE: