FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 10, 2001 8:00 am P93000029705 Secretary of State **DOCUMENT #** 1. Entity Name 07-10-2001 90561 048 ***150.00 REILLY FOOD MANAGEMENT, INC. Principal Place of Business Mailing Address 700 N. EDGEWOOD AVE. 2030 CESERY BLVD Chalonos JACKSONVILLE FL 32205 JACKSONVILLE FL 32211 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 59-3204699 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name REILLY, KEITH A Street Address (P.O. Box Number is Not Acceptable) 2030 CESERY BLVD JACKSONVILLE FL 32211 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 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 September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (5/01 TITLE ☐ Delete TITLE Addition REILLY, KEITH A. NAME 2030 CESERY BLVD. STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP CITY-ST-7IP Delete Change ☐ Addition TITLE TITLE REILLY, MARY NAME NAME 2030 CESERY BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP ☐ 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 ☐ Addition ☐ Delete ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME 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.

SIGNATURE:

kae required SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

... Athchmans

700 N. Edgewood Ave. Jaclsonville, FL 32205

July 7, 2001

Manager Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Madam/Sir:

In past years, this corporation, Reilly Food Management, was sent notifications from your office regarding the filings for the business corporations.

I, Keith Reilly, President of Reilly Food Management, Inc., did not receive no such notices this year at all.

Then, on July 2nd, I suddenly received a 60 day notice that the corporation would be dissolved if I did not act. Hence, I called the Division of Corporations, at 850-245-6059 and talked to a Tyrone Scott. He informed me to send this letter and to ask for all late fees to be waived because this is the first notice that I received for this corporation this year.

I am enclosing a check for \$150 for the normal costs of filing fees. If you need to discuss this matter directly with me, please call me at 904-743-5829.

Sincerely,

Keith Reilly Reilly Food Management