## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P93000054700 Apr 19, 2000 8:00 am Secretary of State 1. Entity Name TERRY PARISH INC. 04-19-2000 90038 012 \*\*\*150.00 Principal Place of Business Mailing Address 1491 18TH STREET P O BOX 4064 FT WALTON BCH FL 32549-4064 NICEVILLE FL 32578 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3193456 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 PARISH, TERRY W Street Address (P.O. Box Number is Not Acceptable) 1491 18TH STREET NICEVILLE FL 32578 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. 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 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 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE PARISH, TERRY NAME STREET ADDRESS 1491 18TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NICEVILLE FL ☐ Addition ☐ Change ☐ Delete TITI F TITLE BURNHAM, CURTIS NAME NAME **1491 18TH STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NICEVILLE FL ~ [\_\_ 'Addition' Change Deletè TITLE **BURNHAM, JIMMY** NAME **1491 18TH STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NICEVILLE FL Change Addition Delete TITLE TITLE SIMON ELLERD NAME 1491 18TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P NICEVILLE FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F 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.

My W. Parish 4/11/00

SIGNATURE: