2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P9300065031 1. Entity Name DDH, INC. 04-30-2001 90345 020 ***150.00 Principal Place of Business Mailing Address 5387 NO SOCRUM LOOP RD 5387 NO SOCRUM LOOP RD LAKELAND FL 33809 LAKELAND FL 33809 2. Principai 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 59-3201167 Not Applicable 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 DUNN, DIANE V Street Address (P.O. Box Number is Not Acceptable) 5387 NO SOCRUM LOOP RD LAKELAND FL 33809 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) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 critoria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE TITLE Delete ☐ Change Cheryl Daugherty Loop Rd DUNN, DIANE V NAME NAME 5387 NO SOCRUM LOOP RD STREET ADDRESS STREET ADDRESS CITY-ST-7IP LAKELAND FL CTY-SY-7IP 3380° TITLE ☐ Delete TITLE Change ☐ Addition DAUGHERTY, CHERYL NAME NAME 5387 NO SOCRUM LOOP RD STREET ADDRESS STREET ADORESS CITY-ST-ZIP LAKELAND FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition DUNN, DIANE V NAME NAME 5387 NO SOCRUM LOOP RD STREET ACCRESS STREET ADDRESS CITY-ST-7IP LAKELAND FL CITY-ST-ZEP TITLE TITLE Change ☐ Addition BORNE, TINA NAME NAME 5387 NO SOCRUM LOOP RD STREET ADDRESS STREET ADDRESS LAKELAND FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z!P ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS C!TY-ST-7IP CITY - ST - ZIP

13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 eath; 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