FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 03, 2000 8:00 am Secretary of State DOCUMENT # **P95000012495** 05-03-2000 90060 015 ***150.00 E.J.N. INVESTMENTS, INC. Mailing Address Principal Place of Business 2761 DUNSINANE ROAD POB 12725 PRAPAPENSACOLA FL 32575-2725 FL 32503 US 2. Principal Place of Business 3. Mailing Address 3410 North 18th Avenue DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3301904 Not Applicable Pensacola, Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 32503 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STONE, ROBERT L Street Address (P.O. Box Number is Not Acceptable) 125 W. ROMANA ST. SUITE 800 PENSACOLA FL 32501 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition ☐ Delete TITLE TITLE NICKELSEN, ERIC J NAME NAME 3410 North 18th Avenue STREET ADDRESS STREET ADDRESS 2761 DUNSINANE RD. CITY-ST-ZIP Pensacola, FLCITY-ST-ZIP PENSACOLA FL 32503 ☐ Addition Change ☐ 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 TITI F Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

☐ Delete

SIGNATURE:

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric J. Nickelsen

4/24/00 (850) 434-22

Daytime Phone #

Change

Addition

17.2.1119