2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000015323 Apr 18, 2000 8:00 am Secretary of State 1. Entity Name COOPER, BARNETTE & PAGE OF FLORIDA, INC. 04-18-2000 90800 024 ***150.00 Principal Place of Business Mailing Address 4093 INDIAN TRAIL PO BOX 1540 DESTIN FL 32541 WINDER GA 30680-6540 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3353587 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COOPER, RONALD G Street Address (P.O. Box Number is Not Acceptable) 4093 INDIAN TRAIL DESTIN FL 32541 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 (NOTE: Registered Agent signature required when reinstating) 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, 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 11. OFFICERS AND DIRECTORS 12. CR2E034 (9/99) DC Change ☐ Addition TITLE ☐ Delete TITLE NAME COOPER, LEWIS J NAME STREET ADDRESS STREET ADDRESS 1962 RAILROAD STREET CITY-ST-ZIP CITY-ST-ZIP STATHAM GA 30666 ☐ Change Addition TITLE DS ☐ Celete IID F NAME NAME BARNETTE, R. LARRY STREET ADDRESS STREET ADDRESS 1962 RAILROAD STREET CITY-ST-ZIP CITY-ST-ZIP STATHAM GA 30666 ☐ Change Addition TITLE ☐ Delete_ TITLE NAME PAGE, BRUCE NAME STREET ADDRESS STREET ADDRESS 1962 RAILROAD STREET CITY-ST-ZIP CITY-ST-ZIP STATHAM GA 30666 ☐ Change ☐ Addition TITLE ☐ Dalete TITLE NAME COOPER, RONALD G NAME STREET ADDRESS STREET ADDRESS 4093 INDIAN TRAIL CITY-ST-ZIP CITY-ST-ZIP DESTIN FL 32541 Change Addition TITLE A ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-7IP 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.

MATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR