2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 06, 2001 8:00 am Secretary of State DOCUMENT # **P95000015901** DANIEL L. BAUGH, INC. 02-06-2001 90229 013 ***150.00 Principal Place of Business Mailing Address 506 S. CENTER ST 506 S. CENTER ST EUSTIS FL 32726 EUSTIS FL 32726 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 65-0563013 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 BAUGH, DANIEL Street Address (P.O. Box Number is Not Acceptable) 506 S. CENTER ST EUSTIS FL 32726 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME BAUGH, DANIEL NAME 506 S. CENTER STREET STREET ADDRESS STREET ADDRESS 2303 E. ORANGE AVENUE CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32726 DITLE ☐ Delete TITLE. Change ☐ Addition NAME BAUGH, DENISE NAME STREET ADDRESS STREET ADDRESS 506. S. CENTER STREET 2303 E. ORANGE AVENUE CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32726 TITLE □ Delete TITLE Change Addition NAME. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 attendment with an address, with all other like empowered.

DANIEL L. BAUGH SIGNATURE: 4 ME OF SIGNING OFFICER OR DIRECTOR