2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 04, 2000 8:00 am DOCUMENT # P9500064027 Secretary of State ROLAND POOL SERVICE, INC. 03-04-2000 90068 041 ***150.00 Principal Place of Business Mailing Address 3812 NORTH "S" STREET PENSACOLA FL 32505 3812 NORTH "S" STREET PENSACOLA FL 32505-4133 401 Massachusetts Ave., Pensacola, F2 32505 3. Mailing Address 401 Massachusetts Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number 59-3332583 nsacola Not Applicable \$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 HULANU, IUNY C. 4042 EMBERS LANDING 8868 Scenic Hills Dameet Address (P.O. Box Number is Not Acceptable) Pensacola, FL 32514 PENSACOLA FL 32505 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 DATE (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. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Roland, Tony C. 8868 Scenic Hills Dr. 8868 Scenic Hills Dr. Picola, Fh. 32514 Ababon, Hiro VTD Dechange 401 Massachusetts Are. TITI F ☐ Addition TITLE Delete ROLAND, TONY C NAME NAME 4042 EMBIRS LANDING STREET ADDRESS STREET ADDRESS PENSACOLA\FL 32506 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ABABSON HIRO 3812 N. X. ST. PENSAÇONA FL 32506 NAME STREET ADDRESS STREET ADDRESS P'cola, FL 32505 Roland, Donna S. 8868 Scenic Hills Dr. CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ROLAND, WONNA S NAME NAME P'cola, Fh 37514 Bushey, Mark Change 8 Keys Court V Pensacola, Fh 32505 Change 4042 EMBERS LANDING STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA\FL 32506 CITY-ST-ZIP TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Jeffrey Anderson 1501 Lansing Dr. #11 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE TITLE ☐ Delete 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR