2002 UNIFORM BUSINESS REPORT (UBR)

May 13, 2002 8:00 am § Secretary of State DOCUMENT # P95000075740 1. Entity Name MILLS-SIMPSON ENTERPRISES, INC. 05-13-2002 90055 040 ***150.00 Principal Place of Business Mailing Address 3860 IRONWOOD LANE 3860 IRONWOOD LANE SUITE 402 SUITE 402 **BRADENTON FL 34209 BRADENTON FL 34209** 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 65-0639063 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 Name MADISON, MARGARET Street Address (P.O. Box Number is Not Acceptable) 3860 IRONWOOD LANE SUITE 402 **BRADENTON FL 34209** 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 Signature, typed or printed name of registered agent and title if applicable. (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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/01) X Change ☐ Addition NAME MADISON, MARGARET Madison, Margaret NAME Ironwood Lane #402 STREET ADDRESS 3860 IRONWOOD LANE, #402 STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** Bradwiton, FL 34209 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME OWENS, GREGG NAME STREET ADDRESS 2860 IRONWOOD LANE, #402 STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209.** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

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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 empower

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

et O. Madison, April 24, 2002, (941)794-6548 SIGNATURE: 1/1/2