2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P95000082117 Mar 30, 2000 8:00 am **Secretary of State** THREE BUCS, INC. 03-30-2000 90109 021 ***150.00 Principal Place of Business Mailing Address 9210 ADAMO DRIVE 9210 ADAMO DRIVE TAMPA FL 33619-2604 **TAMPA FL 33619** 2. Principal Place of Business 3. Mailing Address 4636 N. Dale Mabry Highway 4636 N. Dale Mabry Highway Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Tampa, Florida Tampa, Florida 4. FEI Number Applied For 59-3346205 Not Applicable Country USA \$8.75 Additional Country USA ^{Zip} 33614 33614 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name R. James Robbins, Jr. Street Address (P.O. Box Number is Not Acceptable) LUBRANO, ANDREW J 101 EAST KENNEDY BLVD 101 E. Kennedy Blvd. SUITE 3700 BARNETT PLAZA Suite 3700 **TAMPA FL 33602** Zip Code 33602 of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity subgr SIGNATURE Signature, typed (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 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition ☐ Delete TITLE TITLE Wooley, J. I. 4636 N. Dale Mabry Highway WOOLEY, J.I. NAME NAME STREET ADDRESS 9210 ADAMO DRIVE STREET ADDRESS Tampa, FL 33614 CITY-ST-ZIP TAMPA FL CITY-ST-ZIP ★ Change ☐ Addition ☐ Delete TITLE Salhany, Ronald M. SALHANY, RONALD M. NAME 13600 Icot Boulevard 9929 US HWY 19 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PORT RICHEY FL CITY-ST-ZIP Clearwater, FL 33760 X Change ☐ Addition ☐ Delete TITLE TITLE COLE, JAMES, W., NAME Cole, James W. 10033-B N. Dale Mabry NAME 10031 N. DALE MABRY, STE. 7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL Tampa, FL 33618 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Addition Channe TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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:

J. I. Wooley URE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/00

(813) 870-0010

Date

Daytime Phone #