2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 27, 2001 8:00 am Secretary of State DOCUMENT # P95000094302 MARLOWE, APPLETON & WEATHERFORD P.A. 01-27-2001 90057 004 ***150.00 Principal Place of Business Mailing Address 1031 W MORSE BLVD 1031 W MORSE BLVD SUITE 105 SUITE 105 905848 WINTER PARK FL 32789 WINTER PARK FL 32789 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 59-3350978 Not Applicable Zip Zip Country 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 Name APPLETON, MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 1031 W MORSE BLVD SUITE 105 WINTER PARK FL 32789 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, 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, 2001 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 12. TITLE ☐ Delete TITLE Change ☐ Addition NAME MARLOWE, MICHAEL L NAME STREET ADDRESS 318 BRIARWOOD DR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP WINTER PARK FL 32789 TITLE ☐ Delete Change ☐ Addition NAME APPLETON, MICHAEL J NAME Appleton, Michael J. STREET ADDRESS 2918 LOLISSA LN STREET ADDRESS 641 Huntington Avenue CITY-ST-ZIP MAITLAND FL 32751 CITY-ST-ZIP Winter Park, FL 32789 TITLE ☐ Delete TITLE Change Addition NAME WEATHERFORD, WILLIAM P NAME Weatherford, William P. STREET ADDRESS 2017 HOWARD DR STREET ADDRESS 1583 Highland Road CITY-ST-ZIP CITY-ST-7IP WINTER PARK FL Winter Park, FL 32789 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete

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.

TITI F

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/01

407/629-5008

☐ Change

☐ Addition

Daytime Phone #