2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ФОСОМЕНТ # P96000017935 May 02, 2001 8:00 am Secretary of State TRANSOUTH PROPERTIES, INC. 05-02-2001 90117 014 ***150.00 Principal Place of Business Mailing Address % J. MORGAN BRUNSON, ESQ. % J. MORGAN BRUNSON. ESQ. 1474 JORDAN HILLS COURT 1474 JORDAN HILLS COURT CLEARWATER FL 34616 CLEARWATER FL 34616 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 59-3362770 Applied For Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name- _-ORR, BRUCE A Street Address (P.O. Box Number is Not Acceptable) 702 COUNTRY CLUB DR LARGO FL 33771 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. 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 After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PΩ ☐ Change Addition TITLE ☐ Delete TITLE WALLRICH, WAYNE T NAME NAME % 1474 JORDAN HILLS COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 34616** CITY-ST-ZIP ☐ Addition Change ☐ Defete TITLE TITLE **BRUCE A ORR** NAME NAME 702 COUNTRY CLUB DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LARGO FL 33771 CITY-ST-ZIP ☐ Addition □ Delete TITLE CUBBA, PETER J NAME NAME % 1474 JORDAN HILLS COURT STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34616** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZiP Change ☐ Addition ☐ Delete TITLE TITLE 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

FILED