FILED
Jul 15, 2002 8:00 am
Secretary of State
04-16-2002 90142 014 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000026678

1. Entity Name

Lanier Marine Corp

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1600 SE 17th St Causeway	Same
Suite, Apt. #, etc. 404	Suite, Apt. #, etc.
City & State Ft Lauderdale, FL	City & State
Zip 33316 Country USA	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 62-1634983 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Warren D Hayes, Sr

Street Address (P.O. Box Number is Not Acceptable): Alley, Maass, Rogers & Lindsay, 321 Royal Poinciana Plaza S & PO Box 431

City: Palm Beach FL Zip Code: 33480-0431

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

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 Tax filing requirement and elects to do so. (See criteria on back) ☒

January 1 to May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D NAME Stuart Clayton McWhorter STREET ADDRESS 113 Seaboard Ln Suite B-200 CITY-ST-ZIP Franklin, TN 37067	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE P NAME R Clayton McWhorter STREET ADDRESS 113 Seaboard Ln Suite B-200 CITY-ST-ZIP Franklin, TN 37067	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE AS NAME Robb R Maass STREET ADDRESS 321 Royal Poinciana Plaza S CITY-ST-ZIP Palm Beach, FL 33480	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE ST NAME Nancy S Allen STREET ADDRESS 113 Seaboard Ln Suite B-200 CITY-ST-ZIP Franklin, TN 37067	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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CR2E034B (12/01)

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

SIGNATURE: NSAllen Nancy S Allen-S,T 4-4-02 615-320-3070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #