## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 21, 2000 8:00 am Secretary of State DOCUMENT # P96000073924 1. Entity Name TWOCO, INC. 03-21-2000 90037 010 \*\*\*150.00 Mailing Address Principal Place of Business 24600 S TAMIAMI TRAIL 24600 TAMIAMI TRAIL SUITE 200 200 BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134-7023 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3408028 Not Applicable 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 COREY, GEORGE A Street Address (P.O. Box Number is Not Acceptable) 3678 OLDE COTTAGE LN **BONITA SPRINGS FL 34134** 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** 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Atter 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PSTD TITLE Change Addition TITLE ☐ Delete JUDITH L. COREY COREY, JUDITH L NAME NAME 36780LAC COTTAGENN STREET ADDRESS STREET ADDRESS 3678 OLDE COTTAGE LN CITY-ST-ZIP BONITA SPRINGS FL 34134 CITY-ST-ZIP **BONITA SPRINGS FL 34134** LORA M. COREY TITLE ☐ Defete TITLE 36780606 COTTAGE LN NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE LORA IN COREY 31.78 OLDE LOFTAGE LN NAME STREET ADDRESS STREET ADDRESS BONITA SPRINGS Fl 34134 CITY-ST-ZIP CITY-ST-ZIP DIRECTOR Change Addition TITLE Delete TITLE GEORGE A. COREX NAME NAME 3678 OLDE COTTAGE LN STREET ADDRESS STREET ADDRESS BONITA SPRINGS F134134 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 24600 S. TAMIAMITRALL CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Change Addition ☐ Delete TITLE

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 supplier ental 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 of 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3-16-00

941-948-1399

Daytime Phone #