2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 25, 2001 8:00 am Secretary of State DOCUMENT # P96000101811 1. Entity Name LAW OFFICE OF GARDNER SHARPE, JR., P.A. 04-25-2001 90087 035 ***150.00 Principal Place of Business Mailing Address 8051 N TAMIAMI TRAIL 8051 N TAMIAMI TRAIL SUITE 100 SUITE 100 SARASOTA FL 34243 SARASOTA FL 34243 644116 2. Principal Place of Business 3. Mailing Address 2216 7th STREET WEST SAME AS #2 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0722480 PALMETTO, FLORIDA Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 34221 <u>AZJ</u> Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHARPE, GARDNER JR Street Address (P.O. Box Number is Not Acceptable) 2216 7 STREET WEST 8051 N TAMIAMI TRAIL SUITE 100 SARASOTA FL 34243 CityPALMETTO 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 BOANT GARDNER SHARPE, JR, PRESIDENT 4-20-01 (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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Delete TITLE Change Addition TITLE SHARPE, GARDNER JR NAME NAME 2216 TH STREET WEST 8051 N TAMIAMI TR STE 100 STREET ADDRESS STREET ADDRESS CITY-ST-7IF PALMETTO, FLORIDA 34221 CITY-ST-ZIP SARASOTA FL ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

NAME OF SIGNING OFFICER OR DIRECTOR

(941) 722-2150

GARDNER SHARPE, JR. PRESIDENT