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2001 UNIFORM BUSINESS REPORT (UBR)

Feb 13, 2001 8:00 am DOCUMENT # P96000103816 Secretary of State EFT CATTLE COMPANY, INC. 02-13-2001 90575 010 ***150.00 Principal Place of Business Mailing Address 241 BRADLEY PLACE 241 BRADLEY PLACE PALM BEACH FL 33480 PALM BEACH FL 33480 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0734988 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CHAUNCEY, HARRISON K JR. Street Address (P.O. Box Number is Not Acceptable) 241 BRADLEY PLACE PALM BEACH FL 33480 City 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 Signature, typed or printed name of registered agent and title if applicable. (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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) TITLE ☐ Delete TITLE Addition P TAYLOR, ELIZABETH F NAME NAME Taylor, Elizabeth F. STREET ADDRESS **871 BAY ESPLANADE** STREET ADDRESS 871 Bay Esplanade CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 34630** Clearwater, FL 34630 TITLE Delete TITLE ☐ Change ☐ Addition HARRISON, CHAUNCEY K. J NAME NAME STREET ADDRESS 241 BRADLEY PALCE STREET ADDRESS CITY_ST_7IP CITY-ST-ZIP PALM BEACH FL DCP TITLE -Delete -TITLE ☐ Change Addition KAUPE, PETER D. NAME NAME STREET ADDRESS STREET ADDRESS 241 BRADLEY PLACE CITY-ST-2IF CITY-ST-7IP PALM BEACH FL 33480 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

formation 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 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 edeiver 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 13. I hereby certify that the i indicated on t is report or on or the re

SIGNATUI

Harrison K. Chauncey, Jr.