2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 20, 2001 8:00 am Secretary of State DOCUMENT # P97000013996 1. Entity Name TLR OF BONITA, INC. 03-20-2001 90061 046 ***150.00 Principal Place of Business Mailing Address 9148 BONITA BEACH RD 9148 BONITA BEACH RD **SUITE 210** SUITE 210 00026955 BONITA SPRINGS FL 34135 **BONITA SPRINGS FL 34135** 3. Mailing Address 2. Principal Place of Business 12600 S. Belcher Rd. P.O. Box 960 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Ste. 104 Applied For City & State City & State 4. FFI Number 59-3426760 Not Applicable Largo, Florida <u>Largo, Florida</u> Country US \$8.75 Additional Country Certificate of Status Desired 33779-0960 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent <u> Edgar O. Rawls, President</u> HOOLEY, JOHN Street Address (P.O. Ber Number is Not Acceptable) 12600 S. Belcher Rd., Ste. 104 4532 TAMIAMI TRAIL EAST SUITE 401 NAPLES FL 33962 Targo 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. Edgar O. Rawls, President 03/15/01 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ★ Addition CD X Detete TITLE TITLE BARRETT, DR. WILIAM NAME DiRose, J. Richard NAME STREET ADDRESS 3035 LANCASTER DR STREET ADDRESS 12600 S. Belcher Rd., Ste. 104 CITY-ST-7IP CITY-ST-ZIP NAPLES FL 34105 <u> Largo, FL 33773</u> X Delete TITLE PD TITLE HOOLEY, JOHN F NAME Rawls, Edgar O. 12600 S. Belcher Rd. Ste. 104 Largo, FL 33773 NAME STREET ADDRESS 4532 TAMIAMI TRAIL EAST, STE 401 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP NAPLES FL 33962 ☐ Change ☐ Addition Delete TITLE TITLE BARRET, EMOLEEN NAME NAME STREET ADDRESS 3035 LANCASTER DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34105 Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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. Edgar O. Rawls, President

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

SIGNATURE

TITLE

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

33/15/01

727-535-2673

☐ Change

Addition

CR2E034 (10/00