2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 01, 2003 8:00 am & Secretary of State P97000032057 DOCUMENT # 05-01-2003 90290 017 ***150.00 1. Entity Name SUNBELT PROPERTY INVESTORS, INC. Principal Place of Business Mailing Address 10372 NW 64TH ST -10372 NW 64TH ST PARKLAND FL-33076 PARKLAND-FL-32076-2. Principal Place of Business 2818 N.E. 28 Mailing Address <u>818 N.E</u> Suite, Apt. #. etc Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 65-0754184 Not Applicable Countra \$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 MCCULLOCH, ROBERT L 10372 NW-64TH ST PARKLAND FL 33076 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. the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE ☐ Delete TITLE NAME MCCULLOCH, ROBERT L NAME 10372 NW 64TH ST STREET ADDRESS STREET ADDRESS PARKLAND-FL-33076 CITY-ST-ZIF CITY-ST-ZIF TITLE Delete TITLE MCCULLOCH, JACK S NAME NAME STREET ADDRESS 511 CYPRESS POINTE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE WOODSTOCK GA 30189 ☐ Delete TITLE Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE [] Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 10 or Block 11 if

changed, or on an attack