2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF S

SIGNATURE:

FILED Apr 27, 2001 8:00 am Secretary of State DOCUMENT # **P97000044061** 1. Entity Name LORD & OTHERS, INC. 04-27-2001 90324 009 ***158.75 Principal Place of Business Mailing Address 1771 MANATEE AVE W 1771 MANATEE AVE W BRADENTON FL 34205 BRADENFON FL 34205 V V 7 U U 2. Principal Place of Business 3. Mailing Address 11 300 SNIEL 2106 B AVE B Suite, Apt. #, etc. Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE Gity & State City & State 4. FEI Number Applied For 65-0756534 BRADENTON, BEACH PLMEIT Not Applicable Country \$8.75 Additional Certificate of Status Desired 4217 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ADAMS, JOHN W Street Address (P.O. Box Number is Not Acceptable) 2/06 B AVL B -510-77TH-STREET HOLMES BEACH FL 34217 BRADENTOD 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees (See criteria on back) ELTENSIAN Make Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change TITLE ☐ Delete TITI F Addition CR2E034 (10/00 ADAMS, JOHN W NAME NAME 510 77TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLMES BEACH FL 34217 TITLE ☐ Defete TITLE ☐ Change ☐ Addition CAGNINA, JOHN B NAME NAME STREET ADDRESS 306 73RD ST STREET ADDRESS CITY-ST-ZIP~ HOLMES BEACH FL 34217-CITY_ST-ZIP □ Change TITLE ☐ Delete TITLE ☐ Addition CLELAND, MAX NAME NAME 495 E. DOUGLAS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OLDSMAR FL 34677 TITLE TITLE ☐ Change ☐ Addition -DAVIS, TOMMY-NAME NAME 14820 MCGRADY ROAD STREET ADDRESS STREET ADDRESS BALM-FL 33509-CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition PANDOLPH, JOSEPH NAME STREET ADDRESS 305 CRESCENT DRIVE STREET ADDRESS CITY-ST-ZIP ANNA MARIA FL 34217 CITY-ST-ZIP GENE PIPKIN TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME 5629 3RD ST. WEST STREET ADDRESS STREET ADDRESS BRADENTIN, FL. 34201 CITY-ST-ZIP CITY-ST-ZIP 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

APR 81 941-970-0389