2001 UNIFORM BUSINESS REPORT (UBR)

May 11, 2001 8:00 am Secretary of State DOCUMENT # **P97000082264** PRINCE-BUSH-SMITH INVESTMENTS, INC. 05-11-2001 90007 024 ***150.00 Principal Place of Business Mailing Address 227 W. NEW ENGLAND AVE. 227 W. NEW ENGLAND AVE. WINTER PARK FL 32789 WINTER PARK FL 32789 971227 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 58-2345153 Not Applicable Zip Country Z:p Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T Corporation System MACKINNON, ALEXANDER C Street Address (P.O. Box Number is Not Acceptable) 255 S ORANGE AVE 1200 S. Pine Island Rd. STE 850 WINTER PARK FL 32801 Zip Code Plantation 33324 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. BABARA A. BURKE SPECIAL ASSISTANT SECRETARY 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 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THE ☐ Delete TITL 6 Addition NAME PRINCE, THOMAS P NAME STREET ADORESS 227 W. NEW ENGLAND AVE. STREET ADDRESS OTTY-ST-ZIP CITY-ST-ZiP WINTER PARK FL 32789 D Change ☐ Adoltion TiTLE ☐ Delete 1!T! F BUSH, ROBERT C NAME NAME STREET ADDRESS STREET ADDRESS 2552 HABERSHAM RD. CITY-ST-7IP CITY-ST-7IP ATLANTA GA 30305 TITLE Delete TITLE ☐ Change Addition NAME SMITH, MARK V NAME STREET ADDRESS STREET ACCRESS 621 STEPHENSON AVE. CITY-ST-ZIP CITY-ST-ZIP SAVANNAH GA 31405 TITLE ☐ Delete TITLE Change Addition OLSON, PATRICK F NAME NAME STREET ADDRESS 227 WEST NEW ENGLAND AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 Addition i Delete TITLE Change TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-7:P CITY-ST-ZIP ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C!TY-ST-ZIP 13. Thereby 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 suppliemental report is true and accurate and injury signature shall have the same logal effect as if made under each; that I am an officer or director In the information of the interest of the inte of the corporation or the receiver or trustee empowered to execute this changed, or on an attachment with an address, with all other like employers.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PATRICK F. OLSON 4/20/01