2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 16, 2001 8:00 am Secretary of State DOCUMENT # P97000087964 05-16-2001 90029 023 ***150.00 TONHAUGH PUBLISHING, INC. Mailing Address Principal Place of Business 2150 PRINCETON STREET 2150 PRINCETON STREET SARASOTA FL SARASOTA FL 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0788141 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HAUGHTON, RALSTON Street Address (P.O. Box Number is Not Acceptable) 2150 PRINCETON STREET SARASOTA FL Zip Code City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change TITLE □ Delete TITLE NAME HAUGHTON, RALSTON NAME STREET ADDRESS STREET ADDRESS 2150 PRINCETON STREET CITY-ST-ZIP CiTY-ST-7IP SARASOTA FL ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME HAUGHTON, MARGARET NAME STREET ADDRESS STREET ADDRESS 2150 PRINCETON STREET CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL ☐ Change Addition TITLE TITLE ☐ Delete --- -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

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

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941-953-2747