## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT# P98000001922 Apr 19, 2000 8:00 am Secretary of State 1. Entity Name VAN COOK, INC. 04-19-2000 90115 027 \*\*\*150.00 Principal Place of Business Mailing Address 1258 VENETIA DRIVE POST OFFICE BOX 3443 SPRING HILL, FL 34611 SPRING HILL, FL 34606 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3485120 Not Applicable Zip Country Country \$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 Name ROBERTS, MARGO V. Street Address (P.O. Box Number is Not Acceptable) 1258 VENETIA DRIVE SPRING HILL, FL 34606 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 (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 filing requirement and elects to do so. After MAY 1: 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition TITLE TITLE ☐ Change D/P/S/T Delete NAME NAME ROBERTS, MARGO V. STREET ADDRESS 1258 VENETIA DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SPRING HILL, FL 34606 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME COOK, RICKY STREET ADDRESS STREET ADDRESS 1258 VENETIA DRIVE CITY-ST-ZIP CITY-ST-ZIP SPRING HILL, FL 34606 Addition Change TITLE Delete TITLE 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 TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 likempowered.

MARGO V. ROBERTS

SIGNATURE: 4