## 2000 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## DOCUMENT # P98000006506 May 03, 2000 8:00 am Secretary of State 1. Entity Name NANCY FILMS, INC. 05-03-2000 90093 037 \*\*\*150.00 Principal Place of Business Mailing Address 13647 WATERHOUSE WAY 13647 WATERHOUSE WAY ORLANDO FL 32828-8344 ORLANDO FL 32828-8344 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-3489518 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HENDERSON, JAMES W Street Address (P.O. Box Number is Not Acceptable) 13647 WATERHOUSE WAY ORLANDO FL 32828-8344 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, 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. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12, 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE HENDERSON, JAMES W NAME NAME 13647 WATERHOUSE WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32828 ☐ Change ☐ Addition ☐ Delete TITLE TITLE HENDERSON, ROBERT R NAME NAME 2228 N. MEADE AVE. STREET ADDRESS STREET ADDRESS CITY-ST-7IP **COLORADO SPRINGS CO 80907** CITY-ST-ZIP \_\_\_ Change Addition ☐ Delete TITLE TITLE HENDERSON, AMY R NAME NAME STREET ADDRESS 13647 WATERHOUSE WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32828 ☐ Delete TITLE ☐ Change Addition TITLE HENDERSON, COLLEEN NAME NAME STREET ADDRESS STREET ADDRESS 13647 WATERHOUSE WAY CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32828 ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

MURBINES W. Henderson