Aug 29, 2001 8:00 am Secretary of State 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000009125 1. Entity Name 08-29-2001 90011 043 ***150 00 CLIENT FIRST CORPORATION Principal Place of Business Mailing Address 3212 GULF GATE DR 3212 GULF GATE DR SARASOTA FL 34241 SARASOTA FL 34241 Principal Place of Busine DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 59-3491842 Not Applicable \$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 NOWAKOWSKI, MICHAEL F Street Address (P.O. Box Number if Not Acceptable) 3212 GULF GATE DR SARASOTA FL 34241 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) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F ☐ Delete TITLE Change CR2E034 (5/01 ☐ Addition NAME NOWAKOWSKI, MICHAEL F NAME STREET ADDRESS 3212 GULF GATE DR STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34241 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NOWAKOWSKI, GLENDA NAME STREET ADDRESS 3212 GULF GATE DR STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34241 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition 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.

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

SIGNATURE: PURCHASION OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NowaKowski

8/21/C

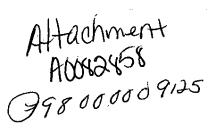
863-647-504

Change

Addition

Daytime Phone #

Client First Corporation 6763 Trail Ridge Drive Lakeland, Florida 33813 (863) 647-5066



August 21, 2001

Florida Secretary of State **Division of Corporations** P O Box 1500 Tallahassee, Florida 32302-1500

Dear Sir:

We respectfully request abatement of the late filing penalty since we received our UBR Form just recently due to our address change. The form was delivered to our former landlord and was late getting to us.

Thank you in advance for your cooperation and understanding and if we can be of any further assistance, please contact us.

nowahowski

Glenda Nowakowski Secretary/Vice President