2002 UNIFORM BUSINESS REPORT (UBR)

Apr 29, 2002 8:00 am Secretary of State P98000012291 DOCUMENT # 1. Entity Name 04-29-2002 90113 005 ***150 00 ROBINSON SPRY INTERIORS, INC. Mailing Address Principal Place of Business 1303 MAIN STREET 1303 MAIN STREET SARASOTA FL 34236 SARASOTA FL 34237 IIS 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3502157 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ICARD, MERRILL, CULLIS, TIMM, ET AL, Street Address (P.O. Box Number is Not Acceptable) 2033 MAIN STREET, STE. 600 SARASOTA FL 34237 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2002 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME SPRY, LINDA STREET ADDRESS STREET ADDRESS 1303 MAIN STREET CITY-ST-ZIP SARASOTA FL 34237 CITY-ST-7IP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME robinson. Dan STREET ADDRESS 1303 MAIN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34237 ☐ Addition TITLE Change ☐ Delete TITLE SPRY, CHARLES NAME NAME STREET ADDRESS STREET ADDRESS 1303 MAIN STREET CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34237 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

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 an ownered 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 they like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: J

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR

CHARLES E. SPRY, TR. 4-16-02 941-365-2030

FILED