2001 UNIFORM BUSINESS REPORT (UBR)

address, with al

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIFECTOR

SIGNATURE:

e empowered.

25/01 407-843-1111

May 02, 2001 8:00 am DOCUMENT # P98000016634 Secretary of State THE NEW ANGEBILT CORPORATION 05-02-2001 90144 047 ***150.00 Principal Place of Business Mailing Address 33 E ROBINSON STREET 33 E ROBINSON STREET SUITE 200 SUITE 200 B0044654 ORLANDO FL 32801 ORLANDO FL 32801 2. Principal Place of Business 3. Mailing Address 37 NONLORATORE 37 North ORTHER MYS Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 1050 1050 City & State City & State Applied For 4. FEI Number 59-3495895 orinno. OPLANDO Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired - - - - -32801 32801= 6. Name and Address of Current Registered Agent GRANSQ .7. Name and Address of New Registered Agent HUSSEY, JOHN Street Address (P.O. Box Number is Not Acceptable) 33 E ROBINSON STREET SUITE 200 Suite 1050 ORLANDO FL 32801 Zia Code 8. The above named environments this stack near or the purpose of changing its registered office or registered agent, or both, in the State of Florida, SIGNATURE ture, 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) ☐ Addition TITLE DDPT Delete TITLE KUHN, CAMERON NAME NAME 27 North ORANGE AUC SK 1050 STREET ADDRESS STREET ADDRESS 33 E ROBINSON STREET, STE 200 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 ☐ Delete TITLE TITLE NAME NAME HUSSEY, JOHN 37 NONLODANE ADE Ste 1.50 STREET ADDRESS STREET ADDRESS 33 E ROBINSON STREET. STE 200 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 TITLE ☐ Delete TITLE ☐ Addition NAME WRIGHT, CHARLES NAME 37 North OKANG AUS SK 1050 STREET ADDRESS STREET ADDRESS 33 E ROBINSON STREET, STE 200 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 TITLE ☐ Delete TITLE Change ☐ Addition 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-7IP TITLE ☐ Delete TITI F Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 the state empowered of the port as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or to changed, or on an attachment with a