2000 UNIFORM BUSINESS REPORT (UBR)

Jan 18, 2000 8:00 am Secretary of State DOCUMENT # **P98000027320** BRISBANE INVESTMENT GROUP, INC. 01-18-2000 90169 035 ***150.00 Principal Place of Business Mailing Address 300 INTERNATIONAL PARKWAY STE, 184 300 INTERNATIONAL PARKWAY STE. 184 0.0005066 HEATHROW FL 32746-5000 HEATHROW FL 32746 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3507281 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CAPITAL CONNECTION, INC. Street Address (P.O. Box Number is Not Acceptable) 417 EAST VIRGINIA STREET SUITE #1 TALLAHASSEE FL 32301 City 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, 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE TITLE ☐ Delete HIRST, MILDRED W NAME NAME STREET ADDRESS 300 INTERNATIONAL PARKWAY STE. 184 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **HEATHROW FL 32746** Change ☐ Addition DP TITLE ☐ Delete TITLE HIRST, GARY T NAME NAME STREET ADDRESS 300 INTERNATIONAL PKWY, STE #184 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** ☐ Change Addition -- - Delete TITLE TITLE DAVIES, JEFF NAME NAME STREET ADDRESS STREET ADDRESS 300 INTERNATIONAL PARKWAY STE. 184 CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** ☐ Change ☐ Delete TITLE ☐ Addition TITLE MCGUIRE, JOSEPH F NAME STREET ADDRESS STREET ADDRESS 300 INTERNATIONAL PARKWAY STE. 184 CITY-ST-ZIP CITY-ST-ZIE **HEATHROW FL 32746** ☐ Delete TITLE Change ■ Addition TITLE GORDON, KENDALL L NAME NAME STREET ADDRESS STREET ADDRESS 300 INTERNATIONAL PARKWAY STE. 184 CITY-ST-ZIP CITY-ST-ZIP **HEATHROW FL 32746** Change ☐ Addition ☐ Delete TITLE TITLE NAME 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.

CITY-ST-7IP

CITY-ST-ZIP

FILED