2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P98000027971 1. Entity Name HRCF, INC. 4-26-2001 90219 034 ***158.75 Principal Place of Business Mailing Address 15201 ROOSEVELT BLVD., STE, 112 15201 ROOSEVELT BLVD., STE, 112 CLEARWATER FL 33760 CLEARWATER FL 33760 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3501994 Not Applicable Zip Country Country \$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 HAYDON, ROGERS K JR. Street Address (P.O. Box Number is Not Acceptable) 15201 ROOSEVELT BLVD., STE. 112 CLEARWATER FL 33760 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agont signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Coange Addition RUBIN, LESLIE A NAME NAME STREE! ADDRESS 15201 ROOSEVELT BLVD., STE. 112 STREET ADDRESS CITY-ST-ZiP **CLEARWATER FL 33760** CITY-ST-ZIP TITLE ☐ Delete TITLE - Onange Addition HAYDON, ROGERS K JR. NAME NAME 15201 ROOSEVELT BLVD., STE. 112 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33760 CITY-ST-ZIP TATLE Delete ☐ Change Addition CUTLER, MELVIN S NAME NAME 35388 US HWY 19 NORTH STREET ACCRESS STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34684 CITY-ST-ZIP TITLE ☐ Delete TITLE Chance. Addition FERRELL, RICHARD C NAME NAME STREET ADDRESS 3379 W. VINE ST., STE. 309 STREET ADDRESS CLIY ST-ZIP KISSIMMEE FL 34741 CHTY-ST-Z!P 7171,8 ☐ Delete TITLE Change Addition NAME NAME STREE1 ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-ZIP TITLE Dejete TITLE ☐ Change ☐ Addition NAME NAM5

13. Thereby 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 receiper 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 attachmen with an address, with all other like empowered

STREET ADDRESS

CHY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

NAME OF SIGNING OFFICER OR DIRECTOR ATURE AND TYPED OR PRINT

Rogers K Haydon 4-19-01 127.539-0777

CTOR Date Capture Promote