2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9800028352-1. Entity Name EMERALD CREST, INC. 01 MAY 23 PH 4: 20 Principal Place of Business Mailing Address 12627 FRONT BEACH ROAD 12627 FRONT BEACH ROAD PANAMA CITY BCH, FL 32407 PANAMA CITY BCH, FL TALLAHASSEE FLORIDA 32407 2. Principal Place of Business 12627 FRONT BEACH ROAD 3. Mailing Address 111 12 ... 12627 FRONT BEACH ROAD Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For PANAMA CITY BCH, FL. Country-59-3511704 Not Applicable PANAMA CITY BCH, FL Country **\$8:75**-Additional- -5. Certificate of Status Desired 32407 USA Fee Required 32407 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARTIN, GEORGE G BISHOP, JOHN P./ Street Address (P.O. Box Number is Not Acceptable) 12627 FRONT BEACH ROAD 650 CLARA AVE. PANAMA CITY BCH, FL 31 A47 FL PANAMA CITY BCH, C tatement for the purpose of changing its registered office of registered agent; or both, in the State of Florida JOHN P BISHOP, JR (NOTE: Registered Agent signature required when reinstating) 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE X Delete TITLE Change X Addition MARTIN, GEORGE G. ERDMAN, DAVID A. NAME NAME 12627 FRONT BEACH ROAD STREET ADDRESS STREET ADDRESS 12627 FRONT BEACH ROAD PANAMA CITY BCH, FL 32407 CITY-ST-ZIP~ CITY-ST-7/P ~ PANAMA CITY BCH, FL 32407 000000434243 -06/05/01--01094 TITLE ☐ Delete TITLE NAME NAME ****308.75 ****308.75 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 201.25 - AC □ Change TITLE ☐ Delete TITLE NAME NAME 10.00-ARARTS STREET ADDRESS STREET ADDRESS 88:75-ARSupp 8:75-Cent □ Change CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Addition Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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-7IP 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 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. SIGNATURE: DAVID A. ERDMAN

Daytime Phone #