## FILED 2000 UNIFORM BUSINESS REPORT (UBR) Feb 09, 2000 8:00 am Secretary of State DOCUMENT # P98000030954 HERITAGE BRISTOL, INC. 02-09-2000 90243 001 \*2,381.25 Principal Place of Business Mailing Address 450 CHALLENGER ROAD 450 CHALLENGER ROAD აიიგ CAPE CANAVERAL FL 32920 CAPE CANAVERAL FL 32920-4226 2. Principal Place of Business 3. Mailing Address 5505 N. Atlantic Ave. 5505 N. Atlantic Ave. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 115 Applied For City & State 4. FEI Number City & State 59-3536065 Cocoa Beach, FL Cocoa Beach, FL Not Applicable Country Zip Country \$8.75 Additional Χ'n 5. Certificate of Status Desired 32931 32931 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Jacqueline McPhillips HARTMAN, MICHAEL A Street Address (P.O. Box Number is Not Acceptable) 5505 N. Atlantic Ave., #115 450 CHALLENGER ROAD CAPE CANAVERAL FL 32920 Cocoa Beach zig 2931 r the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits this statement SIGNATURE 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. (See criteria on back) After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. D/P/S/T DPST Change CR2E034 (9/99) TITLE ☐ Delete TITLE McPhillips, Jacqueline MCPHILLIPS, JACQUELINE NAME NAME 5505 N. Atlantic Ave., #115 450 CHALLENGER ROAD STREET ADDRESS STREET ADDRESS CAPE CANAVERAL FL 32920 CITY-ST-7IP CITY-ST-2IP Cocoa Beach, FL 32931 Ŋ۷ XXChange ☐ Delete TITLE ☐ Addition TITLE MCPHILIPS, MICHAEL NAME NAME McPhillips, Michael 450 CHALLENGER ROAD STREET ADDRESS STREET ADDRESS 5505 N. Atlantic Ave., #115 CAPE CANAVERAL FL 32920 CITY-ST-7IP CITY-ST-ZIP Cocoa Beach, FL 32931 TITLE ☐ Change ☐ Addition Delete TITLE HARTMAN, MICHAEL A NAME NAME 450 CHALLENGER ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CANAVERAL FL 32920 \*\*Ehange ☐ Delete Addition TITLE TITLE Colvard, Alison Kerr-Hull COLVARD HULL, ALISON KERR NAME NAME 5505 N. Atlantic Ave., #115 450 CHALLENGER ROAD STREET ADDRESS STREET ADDRESS CAPE CANAVERAL FL 32920 CITY-ST-ZIP CITY-ST-ZIF Cocoa Beach, FL ☐ Addition ☐ Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Change ☐ Addition TITLE TITLE ☐ Defete NAME 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 trustee empowered to effect 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 of

SIGNATURE: