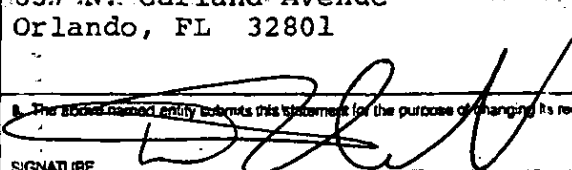
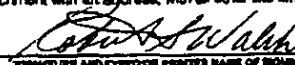


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FILED
Jun 22, 2001 8:00 am
Secretary of State

06-04-2001 90004 005 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000034616				NIC FD 11/13/00 LXN	
1. Entity Name GREEN TOAD, INC.					
Principal Place of Business			Mailing Address		
2. Principal Place of Business 837 N. Garland Ave.			3. Mailing Address 837 N. Garland Ave.		
City & State Orlando, FL 32801			City & State Orlando, FL 32801		
Zip		Country		4. FEI Number 59-3507496	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DeCubelli & Meeks, P.A. 837 N. Garland Avenue Orlando, FL 32801			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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					
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐			10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Robert S. Walsh ☐ Delete 356 Speyside Lane Director Apopka, FL 32712 Pres. Sec.		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 			Date 3-29-01		
ROBERT S. WALSH			Deputy Phone #		

CR2E034 (11/00)