2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2000 8:00 am
Secretary of State
03-13-2000 90039 010 ***150.00

DOCUMENT # P98000046140

1. Entity Name
SWANSON PRODUCTION PARTNERS, INC.

Principal Place of Business	Mailing Address
938 SAINT CROIX CT. ORLANDO FL 32835	938 SAINT CROIX CT. ORLANDO FL 32835-1823

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3009 Weslawn Dr	3009 Weslawn Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Winter Garden FL	City & State: Winter Garden FL
Zip: 34787 Country: USA Orange Co.	Zip: 34787 Country: USA Orange Co.

4. FEI Number 59-3512893 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~WILLIAM N. ASMA, P.A.~~
886 SOUTH DILLARD STREET
WINTER GARDEN FL 34787

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 ______________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

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	D SWANSON, JON H 938 SAINT CROIX CT. ORLANDO FL 32835 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 3009 Weslawn Dr Winter Garden FL 34787
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SWANSON, CONNIE D 938 SAINT CROIX CT. ORLANDO FL 32835 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 3009 Weslawn Dr Winter Garden, FL 34787
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CR2E034 (9/99)

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: [signature] 3/7/00 407 654 4060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #