FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 11, 2002 8:00 am **DOCUMENT #** P98000073478 **Secretary of State** 1. Entity Name 02-11-2002 90127 019 ***150 00 EZELL INVESTMENT CO. Principal Place of Business Mailing Address 440 PEEPLES RD PO BOX 119 YULEE FL 32097 YULEE FL 32097 2. Principal Place of Business 3. Mailing Address SAME SAME Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3535272 Not Applicable 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 EZELL, BEATRICE C Street Address (P.O. Box Number is Not Acceptable) 438 PEEPLES RD. YULEE FL 32097 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 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 • CR2E034 (9/01) ☐ Delete TITLE ☐ Change Addition NAME **EZELL. BEATRICE C** NAME STREET ADDRESS 440 PEEPLES RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP YULEE FL 32097 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME EZELL: GERALD W NAME STREET ADDRESS 2223 RHOERLAN PL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YULEE FL 32097 ☐ Delete TITLE ☐ Change ☐ Addition HOPPER, DEBORAH D NAME STREET ADDRESS STREET ADDRESS 2248 HOPPER LANE CITY-ST-ZIP CITY-ST-ZIP YULEE FL 32097 ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 attact ment with an address, with all other like empowered.

SIGNATURE

GERALD W. EZELL 1-7-2002