FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90950 045 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

90075676

DOCUMENT # P98000077840

1. Entity Name
YELLOWSTONE PARTNERS, INC.

Principal Place of Business	Mailing Address
421 MAGELLAN DRIVE SARASOTA, FL 34243	421 MAGELLAN DRIVE SARASOTA, FL 34243

[redacted]

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
3002 WAVERLY AVE	3002 WAVERLY AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TAMPA FL	City & State: TAMPA FL
Zip: FL Country: USA	Zip: 33629 Country: USA

4. FEI Number 65-0870657 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WEEKS, JAMES B JR. 421 MAGELLAN DRIVE SARASOTA, FL 34243	Name: WEEKS, JAMES B. Jr Street Address (P.O. Box Number is Not Acceptable): 3002 WAVERLY AVENUE City: TAMPA FL Zip Code: 33629

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] JAMES B. WEEKS, JR JAMES PRESIDENT 4/1/03
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
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST WEEKS, JAMES B JR 421 MAGELLAN DRIVE SARASOTA, FL 34243 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DSPT WEEKS, JAMES B. Jr 3002 WAVERLY AVE TAMPA, FL 33629 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV WEEKS, SUSAN ELIZABETH 3002 WAVERLY AVE TAMPA, FL 33629 ☐ 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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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. JAMES B. WEEKS, JR

SIGNATURE: [signature] DPST 4/1/03 (813) 8317532
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #