2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
04-27-2001 90256 040 ***150.00

DOCUMENT # P99000001952

1. Entity Name
EMERALD CREST OF GADSDEN COUNTY, INC.

Principal Place of Business	Mailing Address
ROUTE 5 BOX M HAVANA FL 32333	ROUTE 5 BOX M HAVANA FL 32333

U0042194

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
178 May Nursery Rd.	178 May Nursery Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Havana, Florida	City & State: Havana, Fl.
Zip: 32333 / Country: Gadsden	Zip: 32333 / Country: Gadsden

4. FEI Number 65-0906365 — 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
FLETCHER, HOMER JR. 113 N. MADISON STREET QUINCY FL 32351	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, 2001 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	TD ☐ Delete	TITLE	STD ☒ Change ☐ Addition
NAME	MAY, FRED B	NAME	May, Fred B.
STREET ADDRESS	681 FOREST LAIR	STREET ADDRESS	681 Forest Lair
CITY-ST-ZIP	TALLAHASSEE FL	CITY-ST-ZIP	Tallahassee, FL 32312
TITLE	VD ☐ Delete	TITLE	VD ☒ Change ☐ Addition
NAME	MAY, JOHN B	NAME	May John B.
STREET ADDRESS	RT. 2 BOX 203	STREET ADDRESS	637 Soloman Dairy Rd.
CITY-ST-ZIP	QUINCY FL	CITY-ST-ZIP	Quincy, FL 32351
TITLE	SD ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	MAY, DONALD F JR.	NAME	
STREET ADDRESS	RT. 2 BOX 156 C	STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL	CITY-ST-ZIP	
TITLE	PD ☐ Delete	TITLE	PD ☒ Change ☐ Addition
NAME	MAY, FOUNTAIN H JR.	NAME	May Fountain H. Jr.
STREET ADDRESS	RT 2 BOX 189 C	STREET ADDRESS	835 Attapulgus Hwy.
CITY-ST-ZIP	QUINCY FL	CITY-ST-ZIP	Quincy, FL. 32351
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FLETCHER, HOMER M JR.	NAME	
STREET ADDRESS	113 N. MADISON STREET	STREET ADDRESS	
CITY-ST-ZIP	QUINCY FL	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
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 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: Fred H May — 4/24/01 — (850) 539-6495
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)