2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # P99000021498 Apr 07, 2000 8:00 am Secretary of State 1. Entity Name RJW INVESTMENT GROUP, INC. 04-07-2000 90084 018 ***150.00 Principal Place of Business Mailing Address 4001 WEST SILVER SPRINGS BOULEVARD 4001 WEST SILVER SPRINGS BOULEVARD SUITE 809 SUITE 809 OCALA FL 34482 OCALA FL 34482-4048 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For -3563818 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE **CORAL GABLES FL 33134** 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 re required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PD Addition TITLE Delete TITI F WILLIAM, ROBERT J NAME 4001 WEST SILVER SPRINGS BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCALA FL 34482 Addition ☐ Delete TITLE Change TITLE WILLIAMS, PATRICIA J NAME NAME 4001 WEST SILVER SPRINGS BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCALA FL 34482 TITLE □.Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE 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.