2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P99000031695 Jun 05, 2000 8:00 am Secretary of State 1. Entity Name ROB & CHAD, INC. 06-05-2000 90002 013 ***150.00 Principal Place of Business Mailing Address 2921 WOOD PINE COURT 2921 WOOD PINE COURT SARASOTA, FL 34231 SARASOTA, FL 34231 DUBBATON 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4 FEI Number 65-0907289 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOWARD R. WOMELDORPH, JR. Sirger Address (P.O. Box Number is Not Acceptable)
7648 LOCKWOOD RIDGE ROAD 6489 PARKLAND DRIVE SARASOTA, FL 34243 SARASOTA submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Howard Wome/Joseph 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 14,-OFFICERS AND DIRECTORS 12. Change Addition TITLE Delete NAME NAME ROBERT M. SIROKY, JR. ROBERT M. SIROKY, JR STREET ADDRESS STREET ADDRESS 2921 WOOD PINE COURT 7275 CLOISTER DR. CITY-ST-ZIP CITY-ST-ZIE SARASOTA, FL 34231 SARASOTA, FL 34231 ☐ Change Addition TITLE ☐ Delete TITLE CHAD C. HUNT NAME NAME STREET ADDRESS 2921 WOOD PINE COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF SARASOTA, FL 34231 Change ☐ Addition ☐ Defete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE 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 life empowered. SIGNATURE: