FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: S.J. HEYWORTH - JAVS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Feb 06, 2001 8:00 am Secretary of State DO@UMENT # **P99000052050** 1. Entity Name GENEVA HOLDINGS INC. 02-06-2001 90289 041 ***150.00 Principal Place of Business Mailing Address 2600 WESTERN PARKWAY 2600 WESTERN PARKWAY ORLANDO FL 32803 ORLANDO FL 32803 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3580439 Not Applicable Zip Country 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 Name-HEYWORTH-DAVIS, SIMON J Street Address (P.O. Box Number is Not Acceptable) 2600 WESTERN PARKWAY ORLANDO FL 32803 Zip Code FL 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) 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, 2001 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 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition Change NAME HEYWORTH-DAVIS, SIMON J NAME STREET ADDRESS STREET ADDRESS 2600 WESTERN PARKWAY CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 TITLE □ Delete TITLE Change ☐ Addition NAME MARK, F. GORDEN NAME STREET ADDRESS 3875 INDIAN RIVER DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCOA FL 32922 TITLE ☐ Delete TITLE ☐ Addition _ _ _ Change WARD, WILLIAM NAME NAME STREET ADDRESS 2229 BUTLER BAY DR. N. STREET ADDRESS CITY-ST-ZIP WINDERMERE FL 34786 CITY-ST-ZIP ... Delete TITLE Change ☐ Addition 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 NAME NAME STREET ADDRESS STREET ADDRESS 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 Chanter 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.