2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 23, 2001 8:00 am Secretary of State DOCUMENT # P99000065132 JRT RILEY, INC. 4-23-2001 90151 031 ***150.00 Principal Place of Business Mailing Address 705 ST. ANDREWS BLVD. 705 ST. ANDREWS BLVD. NAPLES FL 34113 NAPLES FL 34113 2. Principal Place of Business 3. Mailing Address 1000 9th St. No. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Ste.502 City & State Applied For City & State 4. FEI Number APPLIED FOR 34102 65-1001326 Not Applicable Naples, FL Zip Country \$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 Name BROWN, ANNIE A Street Address (P.O. Box Number is Not Acceptable) 705 ST. ANDREWS BLVD. NAPLES FL 34113 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. DATE (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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. ☐ Addition TITLE ☐ Delete BROWN, ANNIE A NAME

11. TITLE NAME STREET ADDRESS 705 ST. ANDREWS BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34113 Addition ☐ Change ☐ Delete TITLE TITLE BROWN, C. MITCH NAME NAME STREET ADDRESS STREET ADDRESS 705 ST. ANDREWS BLVD. CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34113 Delete TITLE Addition TITLE HOLCHER, MAX A NAME NAME 1000 9 STREET NORTH SUITE 502 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL-34103-CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 tristge 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01

(941) 117-8206

Daytime Phone #





HOLCHER & COMPANY, P.A.

Certified Public Accountants and Personal Financial Specialists

AND AFFILIATED COMPANIES

The CPA. Never Underestimate The Value.**

535678

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April 16, 2001

Division of Corporations
Uniform Business-Report-Filings —
P. O. Box 1500

Tallahassee, FL 32302-1500

Re: JRT RILEY, INC.

Gentlemen:

Enclosed herewith is 2001 Uniform Business Report for the referenced entity. Also enclosed is a check in the sum of \$150.00 to cover the filing fee.

Thank you for your assistance.

Sincerely,

Holcher & Company

Dorothy J. Plaff

Office Administrator

/dip

Enclosures as Stated

cc: C. Mitch and Annie Brown