FILED 2000 UNIFORM BUSINESS REPORT (UBR) Feb 26, 2000 8:00 am Secretary of State DOCUMENT # P99000067281 02-26-2000 90071 010 ***150.00 CHURCHILL DEVELOPMENT, INC. Mailing Address Principal Place of Business 3912 CANYON LAKE POINT CANYON LAKE POINT 815741 LAKELAND FL 33813-1202 " FL 33813 2. Principal Place of Business 3. Mailing Address 1820 S. Florida AV.C. 1820 S. Florida DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State Not Applicable akelano Kelano Country \$8,75 Additional 5. Certificate of Status Desired ISA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Henderson MILLER, J RICHARD 3912 CANYON LAKE POINT LAKELAND FL 33813 City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so 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 11. PID Change ☐ Addition □ Delete TITLE TITLE Richard Miller MILER, J RICHARD NAME NAMÉ 1820 S. Florida Ave. STREET ADDRESS 3912 CANYON LAKE POINT STREET ADDRESS akeland, FL 33803 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33813 Change ☐ Delete TITLE TITLE NAME NAME David D. Hend STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Addition Change → □ Delete TITL E TITLE homas S. Petcot NAME STREET ADDRESS 1820 S. Florida Ave STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 eport 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

CR2E034 (9/99)