2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED

FILED DOCUMENT # **P99000069280** Apr 30, 2001 8:00 am Secretary of State 1. Entity Name HUNT 4, INC. 04-30-2001 90095 028 ***150.00 Principal Place of Business Mailing Address 2316 HAVERHILL RD. 2316 HAVERHILL RD. TALLAHASSEE FL 32312 TALLAHASSEE FL 32312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3602951 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 HUNT, LOUIS T III Street Address (P.O. Box Number is Not Acceptable) 2316 HAVERHILL RD. TALLAHASSEE FL 32312 City Zip Code 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's gnature 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 Change Addition HUNT, LOUIS T III NAME NAME STREET ADDRESS STREET ADDRESS 2316 HAVERHILL RD. CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32312 TIT: F Delete TITLE ☐ Change Addition HUNT, DEBORAH M NAME NAME STREET ACCORESS 2316 HAVERHILL RD. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TALLAHASSEE FL 32312 THE ☐ Delete TITLE Change Addition NAME: NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE ☐ Delete TITLE Change Addition Addition NAME NAME STREET ADORESS STREET ADDRESS C:TY-ST-ZIP CTY-ST-712 TITLE ☐ Delete TITUE. ☐ Change Addition MAME NAME STREET ADDRESS STREET ADDRESS C-TY-ST-7IP CITY-ST ZIP TITLE ☐ Delete TiTLE Change Addition NAME NAME SIREST ADDRESS STREET ADDRESS CITY-SY-ZIP CHY-SI-ZIP 13. Thereby 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 efficier 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

Louist. Hunt III 4/24/01 (850)893-2134