2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other

SIGNATURE:

FILED Aug 15, 2000 8:00 am Secretary of State DOCUMENT # P99000073154 1. Entity Name SEARCY'S KICK INC. 08-15-2000 90015 015 ***150.00 Principal Place of Business Mailing Address 411 S. PINELLAS AVE. 411 S. PINELLAS AVE. TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 2. Principal Place of Business 3. Mailing Address 229 Timber lane Dr Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SEARCY, JACK Street Address (P.O. Box Number is Not Acceptable) 229 TIMBERLAND DR. PALM HARBOR FL 34683 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees П (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (5/00) President ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME 229 Timber land Dr STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Harbor, FL 34683 Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE 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 Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

1. Searcy 8/7/00

Aug. 7,2000

Enclosed you will find corp filing fees for Kick hne. Beachnuts, hne. Fires Creek, hne.

I did not receive the first notice however upon my receipt of second notice I contacted of second notice I contacted a Michele Mellega @ 850-487-6059 a Michele Mellega @ 850-487-6059 and she said to promptly mail the and she said to promptly mail the checks & it will be reviewed.

Jonna Searces