2000 UNIFORM BUSINESS REPORT FILED Jun 06, 2000 8:00 am DOCUMENT#  $\rho99000079908$ **Secretary of State** The Inquest Group, Inc. 06-06-2000 90007 025 \*\*\*150.00 Principal Place of Business Mailing Address P.O Box S079 Lakeland, Fl33807 4415 Aorica National Dr. Suitr 103 Labeland, A 33813 00033337 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Mark W. McFall, Esquire Street Address (P.O. Box Number is Not Acceptable) 5551 Rickewood Dr. · Suite 501 Naples, Fl 34108 Zip Code City 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 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. Delete ☐ Change Addition TITLE NAME M. Wayne Cross NAME CR2E034 STREET ADDRESS STREET ADDRESS 2825 Parkuny St CITY-ST-ZIP CITY-ST-ZIP halscland Fl 3381/ Delete ☐ Change Addition TITLE John W. Kendonch NAME NAME 2825 Partsway St STREET ADDRESS STREET ADDRESS CITY-ST-ZIP -alscland, A CITY-ST-ZIP Change ☐ Addition TITLE Joseph J Zarbo Jr 4415 Florida National Dr#103 NAME STREET ADDRESS STREET ADDRESS alsoland Fl 33813 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE Charles Ar Smith 4415 Florida National Dr #103 NAME STREET ADDRESS STREET ADDRESS abeland, FT 33813 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE Roy A. Primeau NAME 4415 Florida, National Dr # 103 STREET ADDRESS STREET ADDRESS Laterland, A 33813 CITY-ST-ZIF CITY-ST-ZIP ☐ Change Addition TITLE TITLE NAME NAME Sec Attached Sheet STREET ADDRESS STREET ADDRESS 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 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 changed, or on an attachment with an address, with provider like empowered.

| 2000                     | UNIFORM BUS  | INÈSS REPO                        | DRT                  | (UBR)  |   |   | •    |           |            |
|--------------------------|--|-----------------------------------|----------------------|--|---|---|------|-----------|------------|
| OCUI                     | MENT # P9900   | 000 79908                         | <del></del>          |  |   | :   |      |           |            |
| / /)                     | c Inquest who  | up, Inc.                          |                      |  |   |   |      |           |            |
| 1415 .<br>Suite          | of Business  Florica National Dr. 103  200, Fl 33813   | ( SC), Fl3                        | ) 79<br>3807         | AHachment<br>BOO99997                              |   |   |      |           |            |
| Principal Pl             | ace of Business  |                                   |                      |  |   |   |      |           |            |
| Suite, Apt. 4            | #, etc.  | Suite, Apt. #, etc.               |                      |  | DO NOT WRITE IN THIS SPACE                          |   |      |           |            |
| City & State             |  | City & State                      |                      |  | 4. FEI Number Applied For S9-3595859 Not Applicable |   |      |           |            |
| Zip                      | Country  | Zip C                             |                      | etry   | 5. Certificate of                                   |   |      | 8.75 Ack  | litional   |
|                          | 6. Name and Address of Current   | Registered Agent                  | _l                   |  | 7. Name and A                                       | idress of New Reg                                 |      |           |            |
| Mark W. Mc Fall, Esquire |  |                                   |                      | Name   |   |   |      |           |            |
| 5551 Richewood Dr.       |  |                                   |                      | Street Address (P.O. Box Number is Not Acceptable) |   |   |      |           |            |
| · Sur                    | te 50/   |                                   |                      |  |   |   |      |           |            |
| Naples, Fl 34108         |  |                                   |                      | City   |   |   | FL   | Zip Cod   | £          |
| This corpor              | Signature, typad or printed name of registered eigenteration is eligible to satisfy its Intangible equirement and elects to do so.  a on back) | And the state of the state of     | VIII FEE<br>DOO Fee  |  | 10. Electi  | on Campaign Finan<br>Fund Contribution.           | DATE |           | May Be     |
|                          | OFFICERS AND   | <del></del>                       | 12.                  |  | ADDITIONS/CH  | IANGES TO OFFICE                                  |      |           |            |
| ST ZIP                   | D<br>A. Wayne Tucc<br>4415 Florica No<br>Labeland Fl   | □ Delete<br>Hurao D-#103<br>33813 |                      |  |   |   | · ·  | _] Change | ☐ Addition |
| ST-ZIP                   | h. E. Dombrass<br>4415 Florice Noi<br>halfeland, Fl  | ☐ Delete                          |                      |  |   |   | [    | Change    | Addition   |
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| ST ZIP                   |  | □ Delate                          | 12                   | 1  |   |   |      | Change    | Addition   |
| - atampys                | ·  | ☐ Delete                          | THE<br>NAM<br>STRE   |  | ,   |   | ĺ    | Change    | Addition   |
|                          |  | ☐ Delete                          | TITLE<br>NAM<br>STRE | ·  |   | Paga yang dan |      | Change    | Addition   |
| J                        |  |                                   |                      |  |   |   |      |           |            |

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