I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 01/03/2023

SIGNATURE: GEORGE M MULLENDORE

Electronic Signature of Signing Officer/Director Detail

OPERATIONS MANAGER

City-State-Zip: MCDAVID FL 32568 City-State-Zip: JAY FL 32565

		Electronic Signature of Registered Agent			[
Officer/Director Detail :					
	Title	D	Title	Ρ	
	Name	SMITH, LEWIS J	Name	BRUMLEY, JAMES T	
	Address	3075 HICKORY HOLLOW LANE	Address	7 TWIN CREEKS DRIVE	
	City-State-Zip:	JAY FL 32565	City-State-Zip:	TALLASSEE AL 35078-4750	
	Title	OPERATIONS MGR	Title	D	
	Name	MULLENDORE, GEORGE M	Name	BISHOP, CRAIG	
	Address	7 TWIN CREEKS DRIVE	Address	6251 STONEFIELD DRIVE	
	City-State-Zip:	TALLASSEE AL 36078-4750	City-State-Zip:	MARIANNA FL 32448	
	Title	D	Title	D	
	Name	DAVIS, JERRY	Name	WALKER, SAM	
	Address	P.O BOX 770	Address	3241 LAMBERT BRIDGE	
			0.1 01010 7.0		

PLANTATION, FL 33324 US

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.

TALLASSEE, AL 36078-4750 US

Current Principal Place of Business:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD

SIGNATURE:

7 TWIN CREEKS DRIVE

FOUNDATION, INC.

7 TWIN CREEKS DRIVE TALLASSEE, AL 36078-4750

FEI Number: 56-1578321

Current Mailing Address:

Name and Address of Current Registered Agent:

Entity Name: THE SOUTHEASTERN BOLL WEEVIL ERADICATION

FILED Jan 03, 2023 Secretary of State 4226801138CC

Date

Certificate of Status Desired: No

Date