2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 29, 2007
Secretary of State

DOCUMENT# 110761

Entity Name: CAIN & BULTMAN, INC.

Current Principal Place of Business:

2145 DENNIS STREET
PO BOX 2815
JACKSONVILLE, FL 322032815

New Principal Place of Business:

2145 DENNIS STREET
JACKSONVILLE, FL 322032815

Current Mailing Address:

2145 DENNIS STREET
PO BOX 2815
JACKSONVILLE, FL 322032815

New Mailing Address:

FEI Number: 59-0182850 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDIFER, MICHAEL
2145 DENNIS STREET
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: TYLER, B B,
Address: 2145 DENNIS
City-St-Zip: JACKSONVILLE, FL 00000,

Title: PD ( ) Delete
Name: SANDITER, MA
Address: 2145 DENNIS
City-St-Zip: JACKSONVILLE, FL 32202

Title: CD ( ) Delete
Name: SANDIFER, T.N.
Address: 2145 DENNIS
City-St-Zip: JACKSONVILLE, FL 32202

Title: S ( ) Delete
Name: DERRICK, LA,
Address: 2145 DENNIS
City-St-Zip: JACKSONVILLE, FL 00000,

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: DERRICK, LA,
Address: 2145 DENNIS
City-St-Zip: JACKSONVILLE, FL 32203

Title: VP ( ) Change (X) Addition
Name: KIRK, JAMES
Address: 2145 DENNIS STREET
City-St-Zip: JACKSONVILLE, FL 32203

Title: VP ( ) Change (X) Addition
Name: FAIRCLOTH, WARREN
Address: 2145 DENNIS STREET
City-St-Zip: JACKSONVILLE, FL 32203

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES KIRK VP 05/29/2007

Electronic Signature of Signing Officer or Director — Date