2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 19, 2001 8:00 am Secretary of State **DOCUMENT # 414160** 1. Entity Name M & W CONSTRUCTION COMPANY, INC. 03-19-2001 90061 013 ***150.00 Principal Place of Business Mailing Address 4433 FRANKLIN ST 4437 FRANKLIN ST P. O. BOX 419 MARIANNA FL 32448 MARIANNA FL 32447 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1429136 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WIMBERLY, REX'S Street Address (P.O. Box Number is Not Acceptable) 4421 SPRING VALLEY RD MARIANNA FL 32448 Zip Code City FL ly submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named 6 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After MAY 1, 2001 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. 12. ☐ Change ☐ Addition X Delete TITLE TITLE WIMBERLY, W.E. NAME 3308 PARKRIDGE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MARIANNA FL ☐ Change TITLE ☐ Addition Delete TITLE WIMBERLY, RICHARD D. NAME NAME STREET ADDRESS 4437 SPRING VALLEY ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARIANNA FL ☐ Addition Change TITLE TITLE ☐ Delete President WIMBERLY, REX S. NAME NAME Wimberly, Rex S. STREET ADDRESS 4421 SPRING VALLEY ROAD STREET ADDRESS 4421 Spring Valley Dr. CITY-ST-7IP CITY-ST-ZIP MARIANNA FL Marianna, FL 32448 ☐ Addition Change X Delete TITLE TITLE WIMBERLY, FAY S. NAME NAME STREET ADDRESS 3308 PARKRIDGE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF MARIANNA FL ☐ Change Addition TITLE Delete TITLE Secretary NAME NAME Wimberly, Barbara Lynn STREET ADDRESS STREET ADDRESS 4437 Spring Valley Dr. CITY-ST-ZIP CITY-ST-ZIP Marianna, FL 32448 Change Addition ☐ Delete TITLE TITI F Treasurer Wimberly, Diane J. NAME NAME STREET ADDRESS STREET ADDRESS 4421 Spring Valley Dr.

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 all given in the proposed of the corporation of the corpor

CITY-ST-7IP

SIGNATURE:

CITY-ST-7IP

President ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/01

Marianna, FL 32448

850-526-2678

Daytime Phone #