2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**)

Jan 22, 2003 8:00 am **Secretary of State** F66399 DOCUMENT # 1. Entity Name 01-22-2003 90043 013 ***150.00 WALDHAUER & SON, INC. Principal Place of Business Mailing Address 4996 PALM COAST PARKWAY NORTHWEST 4996 PALM COAST PARKWAY NORTHWEST SUITE 7 SUITE 7 PALM COAST FL 32137 PALM COAST FL 32137 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-2177884 Not Applicable Zip Country 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 CHIUMENTO, MICHAEL D. Street Address (P.O. Box Number is Not Acceptable) 4 OLD KINGS RD NORTH STE B PALM COAST FL 32137 City 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. I am familiar with, and accept the obligations of Distered agent ROY C WAIGHAUSE SE ¢ O SIGNATURE DATE ed or printed name of registered agent and title if applicable. (NOTE: Pregistered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Change ☐ Addition ☐ Delete NAME WALDHAUER, ROY C. S NAME STREET ADDRESS PO BOX 351991 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM COAST FL 32135 Delete TITLE Change ☐ Addition NAME NAME WALDHAUER, ROY C II STREET ADDRESS STREET ADDRESS PO BOX 1881 CITY-ST-ZIP CITY-ST-ZIP FLAGLER BEACH FL 32136 TITI F ☐ Delete TITLE ☐ Change Addition NAME waldhauer, dawn STREET ADDRESS STREET ADDRESS PO BOX 351991 CITY-ST-ZIP CITY-ST-ZIP PALM COAST FL 32135 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME WALDHAUER, ROY C SR STREET ADDRESS STREET ADDRESS PO BOX 351991 CITY-ST-ZIP CITY-ST-ZIP PALM COAST FL 32135 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME

12. 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 10 or Block 11 if changed, or on an attachment with a paddress, with all other like empowered

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FILED