2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2000 8:00 am
Secretary of State
05-09-2000 90065 050 ***158.75

DOCUMENT # P97000061077

1. Entity Name

BLINN VAN MATER ARCHITECT, INC.

Principal Place of Business	Mailing Address
38 MIRACLE STRIP PARKWAY SUITE 3-A FT WALTON BEACH FL 32548 US	38 MIRACLE STRIP PARKWAY SUITE 3-A FT WALTON BEACH FL 32548-6649 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
201 Miracle Strip Pkwy S.E.	201 Miracle Strip Pkwy S.E
Suite, Apt. #, etc.: Suite C	Suite, Apt. #, etc.: Suite C
City & State: Ft. Walton Beach FL	City & State: Ft. Walton Beach FL
Zip: 32548 Country: USA	Zip: 32548 Country: USA

4. FEI Number 59-3458524 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VAN MATER, BLINN 38 MIRACLE STRIP PARKWAY SUITE 3-A FT WALTON BEACH FL 32548	Name: Blinn Van Mater Street Address (P.O. Box Number is Not Acceptable): 201 Miracle Strip Pkwy. S.E. Suite C City: Ft. Walton Beach FL Zip Code: 32548

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] 4/4/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VAN MATER, BLINN 38 MIRACLE STRIP PKWY, SUITE 3-A FT WALTON BEACH FL 32548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition	201 Miracle Strip Pkwy S.E., Suite C Ft. Walton Beach, FL 32548
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition	V Brian J. Lambert 201 Miracle Strip Pkwy S.E., Suite C Ft. Walton Beach, FL 32548
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition	V Ian N. Wright 201 Miracle Strip Pkwy S.E., Suite C Ft. Walton Beach, FL 32548
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
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CR2E034 (9/99)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] REQUIRED 4/4/00 850/243-9244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #