| 2001 | UNIFORM BUSI | NESS REPOI | RT | (UBF | k) | FIL | ED | | | - |
|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|----------------|-------------------------------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------|-----------------------------|--------------|
| DOCUMENT # P9700064796 1. Entity Name GULICK AND MCDANIEL CONSTRUCTION, INCORPORATED | | | | | Jan 19, 2001 08:00 AM Secretary of State | | | | | |
| Principal Plac 4155 DOW RD UNIT 2 MELBOURNE 32934 | e of Business FL Us | Mailing Address 4155 DOW RD UNIT 2 MELBOURNE 32934 | US | FL | | | | | | |
| 2. Principal P | lace of Business | 3. Mailing Address | | ,,, | | | | | | |
| Suite, Apt. #, etc. UNIT Z | | Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | | |
| City & State MELBOURNE Zip | FL Country | City & State MELBOURNE Zip | Count | FL | | FEI Number 9-3459893 | | No | oplied For ot Applicable |] |
| 32934 | US | 32934 | US | ı y | 5. | Certificate of Status Desire | ed 🗌 | \$8.75 Add | | |
| 6. Name and Address of Current Registered Agent GOFF BELINDA 4155 DOW RD UNIT 2 MELBOURNE FL 32934 | | | | Name GOFF Street Ad 4155 DOV UNIT Z City MELBOU | BELIN Idress (P.O. E W RD | Name and Address of No DA lox Number is Not Accept | | | le | - |
| 9. This corporate flags filling re | named entity submits this statement for Signature, typed or printed name of registered agent a prattion is eligible to satisfy its Intangible equirement and elects to do so. ia on back) | nd title if applicable. (NOTE: | Registered FEE | Agent signatur IS \$150.0 WIII be \$5 | e required when re | | O1/19 DATE | | 0 May Be | - |
| 11. | | Make Check Payable | | parunent | | CITION OF THE PROPERTY OF THE | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S MCDANIEL BRYNEL 1399 HELLIWELL ST NE PALM BAY | Delete FL 32907 | | | S GOFF | BELINDA AND STREET NE | OFFICERS AN | D DIRECTOR Change 32935 | S IN 11 | :034 (11/00) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T GOFF BELINDA 1062 HOLLAND ST MELBOURNE | ☐ Delete , | | | | | | ☐ Change | Addition | CR2E0 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP MCDANIEL ROY 1399 HELLIWELL ST NE PALM BAY | Delete | | 1 | | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P GULICK DOUGLAS C. 1062 HOLLAND ST MELBOURNE | ☐ Delete FL 32935 | | | | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | 1 | _ | | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | CITY- | ET ADDRESS ST-ZIP | | | | ☐ Change | Addition | |
| of the cor changed, | ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, w | true and accurate and that my wered to execute this report as | | | | | | | | |
| SIGNAT | | INTED NAME OF SIGNING OFFICER OF | R DIRECTO | OR | 7 | 01/19/2001 Date | | Daytime Phone # | | |