

05-21-2002 90892 006 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000086801

1. Entity Name *Abaco Builders, Inc.*

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business *308 Tequesta Drive* 3. Mailing Address *308 Tequesta Drive*

Suite, Apt. #, etc. *Suite 10* Suite, Apt. #, etc. *Suite 10*

City & State *Tequesta, FL* City & State *Tequesta, FL*

Zip *33469* Country *USA* Zip *33469* Country *USA*

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4. FEI Number *65-0804477* Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name *Charles A. Lofquist, Jr.*

Street Address (P.O. Box Number is Not Acceptable) *236 Fairway East*

City *Tequesta* FL Zip Code *33469*

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

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE *President - Secretary*
 NAME *Charles A. Lofquist, Jr.*
 STREET ADDRESS *236 Fairway East*
 CITY-ST-ZIP *Tequesta, FL 33469*

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE *Vice President - Treasurer*
 NAME *Jeanne M. Lofquist*
 STREET ADDRESS *236 Fairway East*
 CITY-ST-ZIP *Tequesta, FL 33469*

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, without other like empowerment.

SIGNATURE: *[Signature]* DATE: *April 30, 2002* 561-575-5393
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **CHARLES A. LOFQUIST, JR. - PRESIDENT**

CR2E034B (12/01)