

FROM :

FAX NO. : 407-894-8829

2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jun 09, 2000 8:00 am Secretary of State

06-09-2000 90002 004 ***150.00

DOCUMENT # P 99000010642

1. Entity Name

SEMINOLE MASONRY, INC.

Principal Place of Business

Mailing Address

431 CENTER ST. CHULUOTA, FL 32766

P.O. Box 1195 GOLDENROD, FL 32733

2. Principal Place of Business

3. Mailing Address

State, Apt. #, etc.

State, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

59-3567153

Applied For

Not Applicable

Zip

Country

Zip

Country

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

JAMES H. HODGES 431 CENTER ST. CHULUOTA, FL 32766

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when substituting)

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

Table with columns for Officers and Directors (11) and Additions/Changes (12). Includes entries for James H. Hodges, Brian Smith, and Jodi Smith.

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 entries.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/00

Corporate Seal