2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 18, 2008 8:00 am Secretary of State **DOCUMENT # 393062** 1. Entity Name 04-18-2008 90043 028 ***150.00 TAPLIN CONSTRUCTION CORPORATION Principal Place of Business Mailing Address 258 FAIRVIEW 258 FAIRVIEW WEST-PALM BEACH FL 33480 WEST PALM BEACH FL 33480 3, Mailing Address 258 FA 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. CR2E034 (10/07) 1st MOORE 4. FEI Number City & State Applied For 59-1372296 Not Applicable Zip \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TAPLIN, LIBBY-258 FAIRVIEW RD WEST PALM BEACH FL 33480 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 registered agent. SIGNATURE Signature, typed or printed participling streed agent and time if applicable. (NOTE Registried Agent eignature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ∠ 🔲 Deicte TITLE Change ☐ Addition TAPLIN, NORMAN E NAME NAME STREET ADDRESS 2535 EMBASSY DRIVE STREET ADDRESS W PALM BEACH FL 33401 CITY-ST-7P CITY-ST-ZIP TD TITLE Darete TITLE ☐ Change ☐ Addition NAME TAPLIN, JAY A NAME STREET ADDRESS 20967 VERONA WAY STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP TITLE SD Defete TITLE Addition TAPLIN, LIBBY G NAME STREET ADDRESS 258 FAIRVIEW ROAD STREET ADDRESS CITY-SI-78 PALM BEACH FL 33480 CITY-ST-7IP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRES CITY-ST-ZIP CITY-ST-7IP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TV TO SHIP HINTE FAMILE OF SCHING OFFICER OR DIRECTOR

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