FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 02, 2002 8:00 am & Secretary of State **DOCUMENT #** 402960 1. Entity Name 05-02-2002 90075 031 ***150.00 FLORIDA SUN BUILDERS, INC. Principal Place of Business Mailing Address 4049 DUNN DR 4049 DUNN DR SARASOTA FL 34233 SARASOTA FL 34233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1400944 Not Applicable -Zip -----\$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DOERR, WILLIAM H Street Address (P.O. Box Number is Not Acceptable) **4049 DUNN DR** SARASOTA FL 34233 City Zip Code 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, 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing -Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE CR2E034 (9/01) ☐ Addition ☐ Change NAME DOERR, WILLIAM H. NAME STREET ADDRESS 4049 DUNN DRIVE STREET ADDRESS CITY-ST-ZIP Sarasota fl CITY-ST-ZIE TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME BOOTH,B C NAME STREET ADDRESS S. GULFSTREAM AVENUE STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP_ TITLE Delete TITLE ☐ Change ☐ Addition NAME SKALITZKY, ROBERT NAME STREET ADDRESS 1229 N. GULFSTREAM AVE. STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

☐ Delete

3/19/03 Date

941-371-6472

Daytime Phone #

Change

☐ Addition

F-1120A R. 01/01(REMEMBER TO COMPLETE THE BACK OF THE FORM 0000 l 20011,30 0002005043 5 3591400944 0000 7 DOR USE ONLY Florida Corporate Short Form الان Mail coupon only. Keep upper portion for your records. 34233-1428 FLORIDA SUN BUILDERS INC 400944 Income Tax Return 4049 DUNN DR SARASOTA FL FEIN If this amount is \$2,500 or greater, you cannot file F-1120A. If Line 5 is zero '0" or less, enter '0' on Line 6. MMDD Taxable Year Beginning 8. Plus (+)
Penalty and interest (See instructions)
Check here if registive [PB REFUND (Complete Line 9a or 9b for overpayments) 9. Total amount due or overpayment Federal taxable income tax

Radio He Federal NOLD + State income tax Exemption
Check face it negative
Florida net
income · Tax due: 5.5% of Line 5 Less (-) Florida NOLD 7. Less (-)
Payment Credits 98 CREDIT

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