FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 JUN 26 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 430368

1. Corporation Name: Slappey Builders, Inc.

Principal Place of Business	Mailing Address
14129 Pleasant Pt. Ln. Jax., Fl. 32225	14129 Pleasant Pt. Ln. Jax., Fl. 32225

3. Date Incorporated or Qualified: July 1973	3a. Date of Last Report: April 1996
4. FEI Number: 59-1569085	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No	

2. Principal Place of Business	2a. Mailing Address
21 14129 Pleasant Pt. Ln.	26 14129 Pleasant Pt. Ln.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Jax, Fl. 32225	28 City & State: Jax., Fl. 32225
24 Zip: 32225 25 Country: United States	29 Zip: 32225 30 Country: United States

9. Name and Address of Current Registered Agent

LaRoy G. Slappey
14129 Pleasant Pt. Ln.
Jax., Fl. 32225

10. Name and Address of New Registered Agent

81 Name: LaRoy G. Slappey
82 Street Address (P.O. Box Number is Not Acceptable): 14129 Pleasant Pt. Ln.
83 Jax., Fl. 32225
84 City: Jax. FL 85 Zip Code: 32225

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: LaRoy G. Slappey — Signature, typed or printed name of registered agent and title if applicable — LaRoy G. Slappey (NOTE: Registered Agent's signature required when reinstating) — DATE: June 22, 1997

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT LaRoy G. Slappey 14129 Pleasant Pt. Ln. Jax., Fl. 32225 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	VICE-PRESIDENT Gail A. Slappey 14129 Pleasant Pt. Ln. Jax., Fl. 32225 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY Gail A. Slappey 14129 Pleasant Pt. Ln. Jax., Fl. 32225 ☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	100002229261 -07/02/97--01080--018 ****165.00 ****165.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 6-26-97

CR2E034 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: LaRoy G. Slappey — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — LaRoy G. Slappey President — Date: June 7, 1997 — Daytime Phone #: 904