2007 FOR PROFIT CORPORATIONS ANNUAL REPORT (AR)

Mar 14, 2007 8:00 am Secretary of State **DOCUMENT # 515130** 03-14-2007 90035 038 ***158.75 NORA CONSTRUCTION CO. Principal Place of Business Mailing Address 10316 SEAGRAPE WAY PALM BEACH GARDENS FL 33418 10316 SEAGRAPE WAY PALM BEACH GARDENS FL 33418 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Number City & State Applied For 59-1693952 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NORA, JOHN B. JR. <u>Nora, John B. Jr.</u> Street Address (P.O. Box Number is Not Acceptable) 10316 Seagrape Way 230 ROYAL PALM WAY RM 203 -PALM BEACH FL 33480 Zip Code 33418 Palm Beach Gardens 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. John B. Nora, Jr. President 3/05/07 Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 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 HILE ☐ Defete HILE ☐ Change Addition NORA, JOHN B. JR. NAME NAME 10316 SEAGRAPE WAY STREET ADDRESS STREET ADDRESS PALM BCH GARDENS FL CITY - ST - 7IP CITY - ST - ZIP THE ☐ Delete TIME Change Addition NORA, JOHN B. JR. NAME NAME 10316 SEAGRAPE WAY STREET ADDRESS STREET ADDRESS PALM BCH GARDENS FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ■ Addition POLLARD, NANCY NAME NAME 4511 NORTHWEST 20TH PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL 32605 CITY-ST-ZIP Delete TITLE ☐ Change ■ Addition NORA, BARBARA NAME NAME 10316 SEAGRAPE WAY STREET ADDRESS STREET ADDRESS PALM BCH.GARDENS FL CITY-ST-ZIP CHTY-ST-ZIP Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILE Delete IIILE ☐ Change Addition NAME STREET ADDRESS STREE1 ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Fiorida 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 eath; 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.

CITY-ST-ZIP

CITY-ST-7IP

SIGNATURE: John B. Nora, Jr. SIGNATURE AND TYPED OR PRINTED NAME OF SI

3/05/07

561-622-4563

FILED