2000 UNIFORM BUSINESS REPORT (UBR)

Apr 19, 2000 8:00 am Secretary of State DOCUMENT # 671468 1. Entity Name ... 04-19-2000 90070 009 ***150 00 SUTTON ENGINEERING SERVICES, INC. Principal Place of Business Mailing Address 1797 SANTA BARBARA DR. 1797 SANTA BARBARA DR. 941205 DUNEDIN FL 34698 **DUNEDIN FL 34698-3347** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2000110 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Sutton GRIDLEY, MARCELLA C % LAW OFFICE OF S. CURTIS KISER 1968 BAYSHORE BLVD. **DUNEDIN FL 34698 DUNEDIN** mis this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, used or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Delete TITLE ☐ Change ☐ Addition TUTHILL, ALLEN F NAME 1703 EMERALD DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP . CLEARWATER FL 33756 ☐ Delete TITLE ☐ Change Addition TITLE SUTTON, ROBERT P NAME NAME 1797 SANTA BARBARA DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DUNEDIN FL 34698** Change Addition TITLE TITLE ☐ Delete SUTTON MARCIA S. 1797 SANTA BARBARA NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DUNEON FL 34698 CITY-ST-ZIP DUDGOIN, FL ☐ Change Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS

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 path; 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

CITY-ST-ZIP 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert P. Sutton 4/13/00 727-733-9594

FILED