2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#733240

Apr 30, 2003 Secretary of State

Entity Name: CENTRAL FLORIDA BUILDERS' EXCHANGE

Current Principal Place of Business: New Principal Place of Business: 340 N WYMORE ROAD WINTER PARK, FL 327892855 US **Current Mailing Address: New Mailing Address:** 340 N WYMORE ROAD WINTER PARK, FL 327892855 US FEI Number: 59-0529122 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LARSON, TRUDI 340 NORTH WYMORE RD WINTER PARK, FL 32789 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LARSON, TRUDI Name: Name: 340 N WYMORE RD Address: Address: City-St-Zip: WINTER PARK, FL City-St-Zip: Title: Title: (X) Change () Addition () Delete SPECHT, CARL Name: MCCREE, RICHARD JR Name: Address: 333 LAWRENCE ST Address: 500 E PRINCETON ST City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32803 Title: VD () Delete Title: VD. (X) Change () Addition MCCREE, RICHARD JR FINFROCK, BILL Name: Name: 500 EAST PRINCETON ST Address: Address: PO BOX 067754 City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32860 () Delete Title: Title: (X) Change () Addition Name: PACE, PETE Name: MATHEWS, BILL 2301 SILVER STAR RD PO BOX 608100 Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32860 Title: () Delete Title: (X) Change () Addition THORNTON, KEN PACE, PETE Name: Name: 3004 KANANWOOD CT STE 140 2301 SILVER STAR RD Address: Address: City-St-Zip: ORLANDO, FL 32765 City-St-Zip: ORLANDO, FL 32804 Title: () Delete Title: () Change () Addition ELLIS. BILL Name: Name: Address: 765 BIG TREE DR Address: ORLANDO, FL 32750 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRUDI LARSON P 04/30/2003

GAYDEN WILLKINS, DIRECTOR PO BOX 993 ORLANDO, FL 32802

MICHAEL WETZEL, DIRECTOR 9659 TRADEPORT DR ORLANDO, FL 32827

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THOM JONAS, DIRECTOR 1410 ATLANTA AVE ORLANDO, FL 32806