FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Jan 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 (1) DOCUMENT # 819000 YOUNGLOVE CONSTRUCTION COMPANY Principal Place of Business Mailing Address 2015 E. 7TH STREET 2015 E. 7TH STREET P.O. BOX 8800 P.O. BOX 8800 SIOUX CITY IA 51102 DO NOT WRITE IN THIS SPACE SIOUX CITY IA 51102 3. Date Incorporated or Qualified 09/02/1965 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 42-0776606 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 R4 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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 Horida. 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, typed or printed name of registried agent and title it applicable (NCD): Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. R2E034 (10/97 DELFTE STD Change K Addition TITLE 1.1 THEF DESMIDT, R J NAME 1.2 NAME BRADBURY, WILLIAM L. 2015 E 7TH ST STREET ADDRESS 1.3 STREET ADDRESS 2015 E 7TH ST SIOUX CITY IA SIOUX CITY IA 51101 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change K Addition TITLE 21 TITLE GUNSCH, M A NAME 2.2 NAME FIELD, LOREN S. 2015 E 7TH ST STREET ADDRESS 2.3 STREET ADDRESS 2015 E 7TH ST SIOUX CITY IA SIOUX CITY IA 51101 CITY-ST-ZIP 2.4 CITY - ST-ZIP DELFTE Change Addition TITLE 3.1 TITLE SCHALLAU, J L 32 NAME 2015 E 7TH ST STREET ADDRESS 3.3 STREET ADDRESS SIOUX CITY IA CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE GLEESON, J. W 4. 2 NAME NAME 2015 E 7TH ST 4.3 STREET ADDRESS STREET ADDRESS SIOUX CITY IA CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ___ Addition 5.1 TITLE TITLE RUECKERT, M D NAME 5.2 NAME 2015 E. 7TH STREET STREET ADDRESS 5.3 STREET ADDRESS SIOUX CITY IA CITY-ST-ZIP 5.4 CITY-ST-ZIP DETETE 61 THLE Change Addition TITLE GLEESON, R E NAME 6.2 NAME 2015 E 7TH ST STREET ADDRESS 6.3 STREET ADDRESS SIOUX CITY IA CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby cortify 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 logal 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.

FILED

712-233-324-