2003 FOR PROFIT CORPORATION

Apr 28, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR** 826212 DOCUMENT # 04-28-2003 91354 039 ***158.75 1. Entity Name BENDER SHIPBUILDING & REPAIR CO., INC. Principal Place of Business Mailing Address ATTN: JOSEPH W MANGIN ATTN: JOSEPH W MANGIN P.O. BOX 42 P.O. BOX 42 MOBILE AL 36601 MOBILE AL 36601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 63-0019150 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GOODWIN, JAMES W II Street Address (P.O. Box Number is Not Acceptable) 111 MADISON STREET, SUITE 2300 **TAMPA FL 33602** City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition BENDER, THOMAS B JR. NAME NAME 265 SOUTH WATER STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MOBILE AL 36603 CITY-ST-ZIP TITLE n ☐ Delete TITLE Change Addition NAME HIXON, ROSEMARY M NAME STREET ADDRESS 265 SOUTH WATER STREET STREET ADDRESS CITY-ST-ZIP MOBILE AL 36603. CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition D NAME TERRELL, FRANK G JR. NAME STREET ADDRESS STREET ADDRESS 265 SOUTH WATER STREET CITY-ST-ZIP CITY-ST-7IP MOBILE AL 36603 ☐ Delete TITLE ☐ Change ☐ Addition CROUSHORE, BRUCE J NAME NAME STREET ADDRESS STREET ADDRESS 265 SOUTH WATER STREET CITY-ST-7IP MOBILE AL 36603 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME BARNETT, DAVID R NAME STREET ADDRESS 265 SOUTH WATER STREET STREET ADDRESS CITY-ST-ZIE MOBILE AL 36603 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition

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 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 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 10 or Block 11 if of the corporation or the receiver or trustee empowered to execute this re changed, or on an attachment with an address, with all other like empower

STREET ADDRESS

CITY-ST-ZIP

NAME

NAME

STREET ADDRESS

CITY-ST-ZIF

President

4/15/03

FILED