2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 20, 2000 8:00 am Secretary of State **DOCUMENT # F45109** 1. Entity Name RON PUTMAN CONSTRUCTION, INC. 03-20-2000 90110 022 ***150.00 Principal Place of Business Mailing Address 704 BLUEFISH 704 BLUEFISH P.O. BOX 28375 P.O. BDX 28375 44.0 M2 260 PANAMA CITY FL 32411 PANAMA CITY FL 32411-8375 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2397344 Not Applicable Zip Zip Country 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 Name HESS, GLENN L. Street Address (P.O. Box Number is Not Acceptable) 9108 W. HIGHWAY 98 PANAMA CITY BEACH FL 32407 Zip Code City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition Delete TITLE TITLE PUTMAN, JAMES R NAME NAME STREET ADDRESS STREET ADDRESS P.O. BOX 28375, NA CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL **VPS** ☐ Defete TITLE Change TITLE PUTMAN, ANITA W NAME STREET ADDRESS STREET ADDRESS P.O. BOX 28375, NA CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL hange ☐ Delete ☐ Addition TITLE Rickey, Kimberly Putman 3016 Lindholm Dr East NAME PUTMAN. KIMBERLY RENEE NAME STREET ADDRESS STREET ADDRESS P.O. BOX 28375, NA CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL MUDIC, AL 36693 ☐ Change Addition TITLE ☐ Delete PUTMAN, KELLY MICHELLE NAME NAME STREET ADDRESS STREET ADDRESS P.O. BOX 28375, NA CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL ☐ Change Addition TITLE ☐ Delete goc Holliday 1614 now Nampshire Avenue NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ynnHaven, P. 32444

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGantes Judianan

Delete

3-17-00

(850) 2343936

Addition

Daytime Phone #