2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 27, 2000 8:00 am Secretary of State **DOCUMENT # F94427** 1. Entity Name HAUSER RESIDENTIAL CONSTRUCTION CORPORATION 01-27-2000 90060 034 ***150.00 Principal Place of Business Mailing Address 4212 SILVER LANE 4212 SILVER LANE VALRICO FL 33594-3988 VALRICO FL 33594 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4: FEI Number Applied For City & State City & State 59-2212653 Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HAUSER, DENNIS E Street Address (P.O. Box Number is Not Acceptable) 452 SUMMIT CHASE DR. VALRICO FL 33694 Zip Code FL 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12, TITLE ☐ Change ☐ Addition ☐ Delete TITLE Dennis E HAUSER, Pennis E 4103 CYPRESS Point HAUSER, DENNIS E NAME NAME STREET ADDRESS STREET ADDRESS 452 SUMMITCHASE DR. VAIRIUD CI 33594 CITY-ST-ZIP CITY-ST-7IP VALRICO FL 33594 TITLE ☐ Change Addition ☐ Delete TITLE HAUSER, CAROLYA HAUSER, CAROLYN J NAME NAME 4103 Cypress Point Pl STREET ADDRESS STREET ADDRESS 452 SUMMIT CHASE CITY-ST-ZIP 33594 CITY-ST-ZIP UAIRICO VALRICO FL 33594 ☐ Change ■ Addition TITLE TITLE Delete HAUSER, DAVID NAME NAME STREET ADDRESS STREET ADDRESS 814 W. 129TH AVE. CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33612** ☐ Change ☐ Addition ☐ Delete TITLE HAUSER, DENNIS E JR. NAME NAME STREET ADDRESS STREET ADDRESS 518 BETH ANN CITY-ST-ZIP CITY-ST-ZIP VALRICO FL 33594 ☐ Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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.

SIGNATURE

ARCIANATI HAUSER INCOME HAS SIGNING OFFICER OR DIRECTOR

1/4/2000 813-6

Daytime Phone #