2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State
02-01-2001 90016 002 ***150.00

DOCUMENT # F95000003800

1. Entity Name
G.E.M. CONSTRUCTORS INC.

Principal Place of Business	Mailing Address
RT 11 BOX 3 MARION NC 28752 US	RT 11 BOX 3 MARION NC 28752 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2024 Nix Creek Rd	2024 Nix Creek Rd
Suite, Apt. #, etc.: Suite A	Suite, Apt. #, etc.: Suite A
City & State: Marion NC	City & State: Marion NC
Zip: 28752 Country: USA	Zip: 28752 Country: USA

4. FEI Number 56-1347356 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MILLER, LARRY D 778 VETERANS DRIVE EXT. MARION NC 28752	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Miller, Larry D 1304 Veterans Dr Ext Marion NC 28752	☒ Change ☐ Addition Address
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HOLLIFIELD, KATHRYN M ROUTE 4, BOX 688 MARION NC 28752	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V President Hollifield, Kathryn 2656 US 70 West Morion NC 28752	☒ Change ☐ Addition Address
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST MILLER, BETTY J. 778 VETERAN'S DRIVE, EXT. MARION N	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Miller, Betty J. 1304 Veterans Dr Ext Marion NC 28752	☒ Change ☐ Addition Address
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MILLER, BETTY J 778 VETERANS DRIVE EXT. MARION NC 28752	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Miller, Betty J. 1304 Veterans Dr Ext Marion NC 28752	☒ Change ☐ Addition Address
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Mi	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V. Miller, Matthew Todd 235 Meadow Lane Morion NC 28752	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

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: Larry D. Miller 1/22/01 828-652-3767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #