

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 15, 2001 8:00 am**  
**Secretary of State**

02-15-2001 90072 002 \*\*\*150.00

**DOCUMENT # F98000003892**

1. Entity Name

**SUB-SURFACE CONSTRUCTION CO.**

Principal Place of Business

Mailing Address

**5959 COMSTOCK PARK DR.  
 COMSTOCK PARK MI 49321**

**405 WATER STREET  
 PORT HURON MI 48060**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **38-3365134**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

7. Name and Address of New Registered Agent

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 **CD**  Delete  
 NAME **JOHNSON, WILLIAM L**  
 STREET ADDRESS **405 WATER STREET**  
 CITY-ST-ZIP **PORT HURON MI 48060**

TITLE  Change  Addition  
 NAME **See Attached List**  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **PCEO**  Delete  
 NAME **BENDER, JAMES R**  
 STREET ADDRESS **5959 COMSTOCK PARK DRIVE**  
 CITY-ST-ZIP **COMSTOCK PARK MI 49321**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **TCFO**  Delete  
 NAME **EDWARDS, ANDREW C**  
 STREET ADDRESS **5959 COMSTOCK PARK DRIVE**  
 CITY-ST-ZIP **COMSTOCK PARK MI 49321**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **S**  Delete  
 NAME **ABBOTT, SHERRY L**  
 STREET ADDRESS **405 WATER STREET**  
 CITY-ST-ZIP **PORT HURON MI 48060**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 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: *Steven W. Warsinske*

Steven W. Warsinske 2/6/01

(810) 987-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Sub-Surface Construction Co.  
(38-3365134)

717299

#F98000003892

Statement Attached to and Made Part of  
2001 Florida Uniform Business Report (UBR)

Item 12 - Additions/Changes to Officers and Directors:

- |                 |  |                                 |  |
|-----------------|--|---------------------------------|--|
| 1. Title:       | V                                      | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Addition |
| Name:           | Schafer, William F.                    |                                 |  |
| Street address: | 5959 Comstock Park Drive               |                                 |  |
| City-State-Zip: | Comstock Park, MI 49321                |                                 |  |
| 2. Title:       | D/V/Chief Accounting Officer/Treasurer | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Addition |
| Name:           | Warsinske, Steven W.                   |                                 |  |
| Street address: | 405 Water Street                       |                                 |  |
| City-State-Zip: | Port Huron, MI 48060                   |                                 |  |
| 3. Title:       | Assistant Treasurer                    | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Addition |
| Name:           | Nelson, Ronald N.                      |                                 |  |
| Street address: | 2 Northpoint Drive, Suite 305          |                                 |  |
| City-State-Zip: | Houston, TX 77060                      |                                 |  |
| 4. Title:       | D/V                                    | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Addition |
| Name:           | Stone, Robert A.                       |                                 |  |
| Street address: | 405 Water Street                       |                                 |  |
| City-State-Zip: | Port Huron, MI 48060                   |                                 |  |