2000 UNIFORM BUSINESS REPORT (UBR)

Jan 20, 2000 8:00 am Secretary of State DOCUMENT # F9800006483 1. Entity Name 01-20-2000 90098 021 ***158.75 G H WALKER CONSTRUCTION, INC. Principal Place of Business Mailing Address 7830 PINE FOREST ROAD 7830 PINE FOREST ROAD PENSACOLA FL 32526-8404 PENSACOLA FL 33252-6 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 63-1211798 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WILLINGHAM, PATRICK Street Address (P.O. Box Number is Not Acceptable) 7830 PINE FOREST ROAD PENSACOLA FL 33252-6 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 (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 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) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ASS1. SELY TITLE Delete TITLE GILMORE, GARY A. SHERER, MAURICE NAME NAME 25819 CANAL RO. STREET ADDRESS STREET ADDRESS 25819 CANAL ROAD CITY-ST-ZIP CITY-ST-7IP **ORNAGE BEACH AL 36561** ORANGE BEACH, AL 36561 Addition PVCD TITLE ☐ Defete TITLE WILLINGHAM, PATRICK NAME NAME STREET ADDRESS STREET ADDRESS 25819 CANAL ROAD CITY-ST-7IP CITY-ST-ZIP ORNAGE BEACH AL 36561 ☐ Addition Delete TITLE Change TITLE WALKER, GEORGE NAME NAME STREET ADDRESS 25819 CANAL ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ORNAGE BEACH AL 36561** ☐ Change ☐ Addition ☐ Delete TITLE WINBORNÉ, ROYCE NAME NAME STREET ADDRESS and the state of the state of STREET ADDRESS 25819 CANAL ROAD CITY-ST-ZIP **ORNAGE BEACH AL 36561** CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE JOHNSON, MILLARD NAME NAME STREET ADDRESS STREET ADDRESS 25819 CANAL ROAD CITY-ST-ZIP ORNAGE BEACH AL 36561 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition LAIRD, PHILLIP A NAME NAME STREET ADDRESS STREET ADDRESS 25819 CANAL ROAD CITY-ST-ZIP CITY-ST-ZIP ORNAGE BEACH AL 36561 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

FILED

GILMORG. SIGNATURE: _

changed, or on an attachment with an address, with all other like empowered