2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 11, 2001 08:00 AM F99000002154 DOCUMENT # Entity Name **Secretary of State** HENRY ENGINEERING ASSOCIATES, INC. Principal Place of Business Mailing Address PO BOX 759 PO BOX 759 THORSBY THORSBY ALAL35171 35171 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 63-1217382 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KRAEMER 36474 EMERALD COAST PKWY, STE 4101 Street Address (P.O. Box Number is Not Acceptable) DESTIN FL32541 US 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. 01/11/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 \$5.00 May Be 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 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE **X** Change ☐ Addition MONTGOMERY MONTGOMERY MAME SALLY NAME SALLY 23016 US HWY 31 STREET ADDRESS STREET ADDRESS 23016 US HWY 31 JEMISON CITY-ST-ZIP AL**JEMISON** CITY-ST-ZIP AL35085 ☐ Delete TITLE X Change NAME HENRY DAN \mathbf{C} NAME HENRY DAN \mathbf{C} STREET ADDRESS 23016 US HWY 31 STREET ADDRESS 23016 US HWY 31 CITY-ST-ZIP **JEMISON** ALCITY-ST-ZIP **JEMISON** 35085 AL☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition 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: __DAN.C. HENRY

DAN C. HENRY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRES 01/11/2001

Date Daytime Phone #

CR2E034 (11/00)