2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State
03-10-2003 90187 020 ***150.00

DOCUMENT # F99000002933

1. Entity Name
DILLARD SMITH CONSTRUCTION COMPANY

Principal Place of Business	Mailing Address
4001 INDUSTRY DRIVE CHATTANOOGA TN 37416	4001 INDUSTRY DRIVE CHATTANOOGA TN 37416

☐ CHECK HERE IF MAKING CHANGES

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 76-0589264 ☐ 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
CAPITOL CORPORATE SERVICES, INC. 1333 N. DUVAL STREET TALLAHASSEE FL 32303	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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BOWEN, SAM C 4001 INDUSTRY DRIVE CHATTANOOGA TN 37416	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S. LANDRETH, MIKE R. 4001 INDUSTRY DR. CHATTANOOGA TN 37416	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP HICKS, HAROLD W JR. 4001 INDUSTRY DRIVE CHATTANOOGA TN 37416	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FIRNQSTAFF, NICK 1360 POST OAK BLVD Suite 2100 HOUSTON, TX 77056	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WOODALL, BILLY J 4001 INDUSTRY DRIVE CHATTANOOGA TN 37416	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DASV GORDON, DANA A 1360 POST OAK BLVD., SUITE 2100 HOUSTON TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DASV HADDOX, JAMES H 1360 POST OAK BLVD., SUITE 2100 HOUSTON TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVAS JENSEN, DERRICK A 1360 POST OAK BLVD., SUITE 2100 HOUSTON TX 77056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Mike Landreth 2-28-03 423-490-9404
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #