2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 30, 2001 8:00 am Secretary of State **DOCUMENT # H35616** S & F CONSTRUCTION, INC. 01-30-2001 90067 004 ***150.00 Principal Place of Business Mailing Address 2180 S.E. 1ST STREET 2180 S. E. 1ST STREET **BOYNTON BEACH FL 33435** BOYNTON BEACH FL 33435 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 59-2499604 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KEELEY, JOSEPH F Street Address (P.O. Box Number is Not Acceptable) 2424 NORTH FEDERAL HIGHWAY **SUITE 314 BOCA RATON FL 33431** Zip Code FL .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, 2001 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 11. OFFICERS AND DIRECTORS 12. Pres. PTD Addition TITLE ☐ Delete TITLE ■ Change Ford, James D. NAME FORD, JAMESD NAME 3927 89th Rd. South STREET ADDRESS 3927 89TH RD S STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Boynton Beach, FL. **BOYNTON BEACH FL** TITLE ☐ Delete TITLE Change ☐ Addition NAME SHOOK, DONALD R NAME STREET ADDRESS 2180 S E 1ST ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL** TITLE ☐ Addition TITLE ☐ Delete NAME MCMULLEN, JIM NAME STREET ADDRESS 111 ROYAL PALM WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BELLE GLADE FL** ☐ Change ☐ Delete Treas. ■ Addition NAME Ford, Linda E. NAME STREET ADDRESS STREET ADDRESS 3927 89th Rd. South CITY-ST-7IP CITY-ST-7IP Boynton Beach, FL. ☐ Delete TITLE TITLE Change 🗔 Addition Director NAME NAME STREET ADDRESS STREET ADDRESS Ford, Casey CITY-ST-ZIP CITY-ST-ZIP 2729 Graduate Ct. ☐ Delete TITLE ☐ Change ☐ Addition TITLE Orlando, Fl 32826 NAME NAME STREET ADDRESS STREET ADDRESS

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 file 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 reserver 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jim Ford (pres.) 1/16/01 (561) 737-4175