FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mar 19, 2002 8:00 am **Secretary of State** DOCUMENT # H70108 03-19-2002 90031 019 ***158.75 1. Entity Name ENCORE CONSTRUCTION COMPANY 425230 DO NOT WRITE IN THIS SPACE 3. Mailing Address 2. Principal Place of Business P.O. Box 771599 1133 Crown Park Circle Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Winter Garden, FL Winter Garden, FL 59-2592776 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 34777-1599 Orange 34787 Orange 7. Name and Address of Current Registered Agent Rainey, Patrick T. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 2840 Wagon Court IN THIS SPACE ^CSaint Cloud 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, Fee is \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Amended UBR is \$61.25 Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. CR2E034B (12/01) TITLE TITLE PD NAME NAME Rainey, Patrick T. STREET ADDRESS STREET ADDRESS 2840 Wagon Court CITY-ST-ZIP CITY-ST-ZIP Saint Cloud, FL 34772 TITLE TITLE VΡ NAME NAME Mueller, Lynn E. STREET ADDRESS STREET ADDRESS 29716 SR 46 CITY-ST-ZIP CITY-ST-ZIP Sorrento, FL 32776 TITLE TITLE NAME Rainey, Louise B. STREET ADDRESS STREET ADDRESS DO NOT WRITE 2840 Wagon Court CITY-ST-ZIP CITY-ST-ZIP Saint Cloud, FL 34772 TITLE IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-St-7tP 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 suppliemental 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 ontristae empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all tuber like empowered. Patrick T. Rainey, President

SIGNATURE:

2/28/02 407-877-5903

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Daytime Phone #