2006 LIMITED LIABILITY COMPANY

Apr 20, 2006 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # L04000079675 04-20-2006 90027 041 ****55.00 BARNUM CONSTRUCTION, LLC Principal Place of Business Mailing Address 1682 MAYHEW STREET 1682 MAYHEW STREET TALLAHASSEE, FL 32304 TALLAHASSEE, FL 32304 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04182006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number Applied For 26-3966475 Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARNUM, THOMAS L Street Address (P.O. Box Number is Not Acceptable) MAY HEW STREET (ONLY CHANGE) > 1827 TYNDALL DRIVE TALLAHASSEE, FL 32304 City 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) Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGRM TITLE ☐ Delete TITLE ☐ Change ☐ Addition BARNUM, THOMAS L NAME NAME 1682 MAYHEW STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP TALLAHASSEE, FL 32304 CITY-ST-ZIP MGRM ☐ Delete ☐ Change ☐ Addition TITI F ПΠЕ NAME BARNUM, CHRISTOPHER L STREET ADDRESS 1682 MAYHEW STREET STREET ADDRESS TALLAHASSEE, FL 32304 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. THOMAS L. BARNUM

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SIGNATURE: E AND TYPED OR PRINTED HAVE OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-ZIP

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