FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2004 8:00 am Secretary of State 04-30-2004 90396 018 ***150.00 L24710 DOCUMENT # 1. Entity Name SOUTH BREVARD WALLBOARD COMPANY, INC. 94041324 Principal Place of Business Mailing Address C/O GERALD D. YOUNG C/O GERALD D. YOUNG 1541 ZAFFER STREET NW 1541 ZAFFER STREET NW PALM BAY FL 32907-8624 PALM BAY FL 32907-8624 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-2976043 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name YOUNG, GERALD D Street Address (P.O. Box Number is Not Acceptable) 1541 ZAFFER STREET N.W. PALM BAY FL 32905 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 24 FILE NOWILL FEET IS:\$150.00. Arta: May 1,2003 Fee will be \$550.00. Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change Addition YOUNG, GERALD D NAME NAME 1541 ZAFFER ST. NW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BAY FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME YOUNG, CONNIE NAME STREET ADDRESS 1541 ZAFFER ST. NW STREET ADDRESS CITY-ST-ZIP PALM BAY FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME YOUNG, RANDY NAME STREET ADDRESS 1541 ZAFFER STREET NW STREET ADDRESS CITY-ST-7IP PALM BAY FL 32907 CITY-ST-ZIP Delete TITLE ☐ Change Addition PIPPIN, BOBBY NAME NAME STREET ADDRESS **153 BEGONIA STREET** STREET ADDRESS CITY-ST-7IP MELBOURNE FL 32935 CITY-ST-7/P TITLE Delete TITLE ☐ Change Additio: NAME NAME STREET ADDRESS STREET ADDRESS CITY-51-78P CITY-ST-ZIP TITLE Delete TITLE Change Additio Additio NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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.

FILED