2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 30, 2002 8:00 am Secretary of State **DOCUMENT #** L44015 04-21-2002 90931 001 *****8.75 1. Entity Name 04-21-2002 90931 002 ***150.00 SUTTON ENGINEERING, INC. Principal Place of Business Mailing Address 3874 SAN JOSE PARK DRIVE 3874 SAN JOSE PARK DRIVE SUITE ONE SUITE ONE JACKSONVILLE FL 32217 JACKSONVILLE FL 32217 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 59-2988373 Applied For Zip Not Applicable Country Zin Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent Fee Required BRANT MOORE SAPP MACDOANLD & WELLS P A BARNETT CENTER **50 NORTH LAURA STREET** JACKSONVILLE FL 32202 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. SIGNATURE NOTE: Reg ed Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Election Campaign Financing \$5.00 May Be (See criteria on back) П Make Check Payable to Department of State Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PTSD Delete TITLE NAME SUTTON, DAVID R. ☐ Addition (9/01 NAME STREET ADDRESS 3874 SAN JOSE PARK DRIVE, STE ONE STREET ADDRESS JACKSONVILLE FL 32217 CITY-57-ZIP CR2E034 CITY-ST-ZIP DITE Delete IIILE NAME ☐ Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP mne ☐ Delete TITLE NAME Change " Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIE ☐ Delete TITLE NAME ☐ Change Addition NUME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-20P TITLE ☐ Delete TITLE NAME Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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 11 or Block 12 if the corporation of the corporation of the receiver 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

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