## FILED 2001-UNIFORM BUSINESS REPORT (UBR) May 17, 2001 8:00 am DOCUMENT # Secretary of State 1. Entity Name WILLARD BROTHERS CONSTRUCTION, INC. 05-17-2001 91282 036 \*\*\*158.75 Principal Place of Business Mailing Address 5391 NOB HILL ROAD 5391 NOB HILL ROAD SUNRISE, FL 33351 SUNRISE, FL 33351 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0165402 City & State City & State Applied For Not Applicable Zio 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 WILLARD, A.BRUCE Street Address (P.O. Box Number is Not Acceptable) 5391 NOB HILL ROAD SUNRISE, FL 33351 City Zip Code is statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submit A.BRUCE WILLARD 4/30/01 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOWIII FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 OFFICERS AND DIRECTORS 11. 12. CR2E034 (11/00 Change ☐ Addition Delete TITLE TITLE WILLARD, A. BRUCE D/P NAME NAME 5391 NOB HILL ROAD STREET ADDRESS STREET ADDRESS SUNRISE, FL 33351 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE D/SVP/SCR WILLARD, DANNY L. NAME NAME 5391 NOB HILL ROAD STREET ADDRESS STREET ADDRESS SUNRISE, FL 33351 CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition Delete TITLE TITLE WILLARD, JAMES L. D NAME NAME 7060 NW 83 TERRACE STREET ADDRESS STREET ADDRESS PARKLAND, FL 33067 CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE JON I. STONE EVP/COO NAME 5391 NOB HILL ROAD STREET ADDRESS STREET ADDRESS SUNRISE, FL 33351 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE VALLE, STEPHEN A. VP/OPERATIONS 5391 NOB HILL ROAD STREET ADDRESS STREET ADDRESS SUNRISE, FL 33351 CITY-ST-ZIE CITY - ST-709 TITLE Delete TITLE Change Addition WILLARD, WM. J. VP/CONSTRUCTION NAME NAME 5391 NOB HILL ROAD STREET ADDRESS. STREET ADDRESS SUNRISE, FL 33351 CITY-ST-ZIP CITY-ST-7/P 13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. For the certify that the information indicated on this report or supplemental popurity frue and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the received or mustee empowered to execute this report as required by Chanter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment of the corporation of the co

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A.BRUCE WILLARD, PRESIDENT

4/30/01

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DOCUM	/IENT# L441	75 /				10001517	
Entity Name	WILLARD BROTH	ERS CO	NSTRUCTION	INC	j V		
	of Business OB HILL ROAD C, FL 33351	53	Mailing Address 5391 NOB HILL ROAD SUNRISE, FL 33351				
Principal Place of Business  Suite, Apt. #, etc.		3. N	3. Mailing Address				
		S	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State			City & State	- <del></del>	<u>_</u>	. 4. FEI Number Applied For Not Applied For Not Applicate	
Zip	Country	Z	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of C	Current Regist	ered Agent	N	ame	7. Name and Address of New Registered Agent	
WILLARD, A. BRUCE					Street Address (P.O. Box Number is Not Acceptable)		
	NOB HILL ROARISE, FL 33351						
				C	da.	FL Zip Code	
ignature _	Alka	ement for the period agent and title if	applicable. (NO	s registered of  A . E	ffice or register	ered agent, or both, in the State of Florida.  WILLARD 4/30/01  ed when reinstating)  DATE	
SIGNATURE	Signature, typed or punted harrie of register ration is eligible to satisfy its Integuirement and elects to do so	ered agent and title if	applicable. (NO	A . E	ffice or register  RUCE V  and signature requir  \$150.00  be \$550.00	ered agent, or both, in the State of Florida.  NTLLARD 4/30/01  ed when reinstating)  DATE  10. Election Campaign Financing \$5.00 May Be Added to Fees agents.	
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A. BRUCE WILLARD, PRESIDENT 4/30/0130954/346-4066
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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