2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 05, 2003 8:00 am Secretary of State M92921 DOCUMENT # 05-05-2003 91400 020 ***150.00 1. Entity Name WOODBURN AND SON, INC. Principal Place of Business Mailing Address 14395 U.S. HIGHWAY #1 14395 U.S. HIGHWAY #1 SEBASTIAN FL 32958 SEBASTIAN FL 32958 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 65-0125342 Not Applicable Zip Country Zip 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 WOODBURN DALE Street Address (P.O.-Box Number is Not Acceptable) 8045 135TH STREET **ROSELAND FL 32958** City Zip Code 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE Change ☐ Addition TITLE ☐ Delete DVST NAME WOODBURN, DALE NAME STREET ADDRESS STREET ADDRESS 8045 135TH ST. CITY-ST-ZIP CITY-ST-ZIP ROSELAND FL: ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME WOODBURN, ARNOLD STREET ADDRESS 631 SW 24TH ST... STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

telex Woode SIGNATURE: DaleSWoodburn, UVIce President

changed, or on an attachment with an address, with all other like empowered.

FILED