2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 11, 2001 8:00 am Secretary of State DOCUMENT # P0000036103 1. Entity Name SUSSEX CONSTRUCTION, INC. 05-11-2001 90313 006 ***158.75 Principal Place of Business Mailing Address 720 S. ORANGE AVENUE 720 S. ORANGE AVENUE SARASOTA FL 34236 SARASOTA FL 34236 000006143 2. Principal Place of Business 3. Mailing Address 5134 Marbella IXE 5134 MARBELLA Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE DRIVE City & State City & State 4. FEI Number Applied For <u>ORLANDO</u> ORIDA FLORI DA ORLANDO 65-0997121 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired 32837 32837 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SILBERSTEIN, DAVID M Street Address (P.O. Box Number is Not Acceptable) 720 S. ORANGE AVENUE SARASOTA FL 34236 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (10/00) TITLE Change ☐ Addition JOHN SEARLE BRADLEY NAME NAME STREET ADDRESS 5134 MARBEUM ISLE STREET ADDRESS CITY-ST-ZIP ORLANDO CITY-ST-ZIP FLORIDA 32837 TITLE □ Delete Change ☐ Addition NAME GREGOREY ALFRED SEARLE NAME BRANSHILL FARM COTTAGE, 123 HASTING STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROAD, BATTLE, EAST SUSSEX, ENGLAND TITLE TITLE ☐ Delete Change ■ Addition NAME NAME STREET ADDRES STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP . ; TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO