2001 UNIFORM BUSINESS REPORT (UBR) FILED May 01, 2001 08:00 AM P00000037979 DOCUMENT# Entity Name **Secretary of State** PALMER CHURCH BUILDERS, INC. Principal Place of Business Mailing Address 7024 70TH ST. N. 7024 70TH ST. N. PINELLAS PARK FL PINELLAS PARK FL33781 33781 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 Applied For 59-3639171 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PALMER MICHELLE L 7024 70TH STREET NORTH Street Address (P.O. Box Number is Not Acceptable) PINELLAS PARK FL33781 US Zip Code 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. 05/01/2001 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 ☐ Delete TITLE ☐ Addition CR2E034 (11/00) MAME PALMER ALLEN NAME 7024 70TH STREET NORTH STREET ADDRESS STREET ADDRESS PINELLAS PARK CITY-ST-ZIP FL 33781 CITY-ST-ZIP ☐ Delete TITLE ☐ Change NAME PALMER MICHELLE L NAME STREET ADDRESS 7024 70TH STREET NORTH STREET ADDRESS CITY-ST-ZIP PINELLAS PARK FL 33781 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition PALMER LORNE NAME STREET ADDRESS 7024 70TH STREET NORTH STREET ADDRESS CITY-ST-ZIP PINELLAS PARK 33781 CITY-ST-ZIP ☐ Delete TITLE Change Addition PALMER RICHARD NAME STREET ADDRESS 7024 70TH STREET NORTH STREET ADDRESS CITY-ST-ZIP PINELLAS PARK FL 33781 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ 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 changed, or on an attachment with an address, with all other like empowered.

05/01/2001

Daytime Phone #

Date

SIGNATURE: _ Michelle Palmer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR