2001 UNIFORM BUSINESS REPORT (UBR)

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

FILED Apr 03, 2001 8:00 am Secretary of State DOCUMENT # P0000046430 ISLAND HARBOR CUSTOM BUILDERS, INC. 04-03-2001 90089 020 ***150.00 Principal Place of Business Mailing Address 331 CAPE CORAL PARKWAY WEST 331 CAPE CORAL PARKWAY WEST CAPE CORAL FL 33914 CAPE CORAL FL 33914 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Unit Applied For 4. FEI Number City & State City & State 65-1008980 Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent eterson SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 City 0/0 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent FILE NOW!!! 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. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change ☐ Addition TITLE TITLE ☐ Delete PETERSON, ROBERT NAMÉ NAME 331 CAPE CORAL PARKWAY WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33914 ☐ Addition ☐ Change TITLE ☐ Delete TITLE SNOW, ROBERT NAME NAME 331 CAPE CORAL PARKWAY WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33914 ☐ Change -- [☐ Addition TITLE ☐ Delete TITLE PETERSON, KATHLEEN NAME NAME 331 CAPE CORAL PARKWAY WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CAPE CORAL FL 33914 ☐ Delete □ Channe ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 77.44. 27.77 CITY-ST-ZIP CITY-ST-ZIP TITLE .. ☐ Delete TITLE ☐ Change ☐ Addition NÁME 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 eath; 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

obert V. Peterson