2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 25, 2001 8:00 am DOCUMENT # P00000052299 1. Entity, Name Secretary of State RIDGE SURVEYING AND CONSTRUCTION STAKING, INC 04-25-2001 90155 007 ***158.75 Principal Place of Business Mailing Address 2106 S. COMBEE ROAD SUITE B LAKELAND, FL 33801 AUU56794 2. Principal Place of Business 3. Mailing Address 2106 S.COMBEE ROAD 2106 S. COMBEE ROAD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE B SUITE B City & State City & State 4. FEI Number Applied For LAKELAND, FLLAKELAND, FL Not Applicable 59-3647750 Country Country Ζip \$8.75 Additional 5. Certificate of Status Desired 33801 US 33801 US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DONALD H. WILSON, JR. 245 S. CENTRAL AVENUE Street Address (P.O. Box Number is Not Acceptable) BARTOW, FL 33830 Zip Code entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. DONALD H. WILSON, 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. (See criteria on back) values to be Added to Fees Make Check Payable to Department of State 11. reported to shareholders cons KND Form TORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (11/00) TITLE DIRECTOR XX Delete TITLE **XX**Change ☐ Addition PRESIDENT NAME NAME LARRY P. BOWEN, JR LARRY P. BOWEN, JR. STREET ADDRESS STREET ADDRESS 101 NW 5TH ST, 2180 THOMPSON ROAD CITY-ST-ZIP CITY-ST-ZIP MULBERRY, FL 33860 BARTOW, FL 33830 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TET! F VICE PRES., SEC'Y., TREAS 🗆 Change **XX**Addition NAME FRED P. AMMERMANN STREET ADDRESS STREET ADDRESS 6511 LONGOAK COURT CITY-ST-ZIP CITY-ST-ZIP LAKELAND, FL 33811 TITLE ☐ Delete 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-7IP 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.

LARRY P. BOWEN,

SIGNATURE AND TYPED OR PRINTED NAME OR SIGNING OFFICER OR DIRECTOR

JR. 4/10/01

Date

863-606-9161

Daytime Phone #