2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State
05-12-2002 90649 016 ***150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000054281

1. Entity Name
HABITAT RESTORATION RESOURCES, INC.

Principal Place of Business	Mailing Address
224 NE 47TH ST. POMPANO BEACH FL 33064	224 NE 47TH ST. POMPANO BEACH FL 33064

2. Principal Place of Business	3. Mailing Address
1945 Coral Point Drive	1945 Coral Point Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Cape Coral, FL	City & State: Cape Coral, FL
Zip: 33990 Country: LEE	Zip: 33990 Country: LEE

4. FEI Number: 65-1037432 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

EGAN, LAUREL A
224 NE 47TH ST.
POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name: Laurel A Egan (Same)
Street Address (P.O. Box Number is Not Acceptable): 1945 Coral Point Drive
City: Cape Coral FL Zip Code: 33990

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] LAUREL A EGAN PRESIDENT 4/20/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD EGAN, ROBERT J 224 NE 47TH ST. POMPANO BEACH FL 33064	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1945 Coral Point Drive Cape Coral, FL 33990
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD EGAN, LAUREL A 224 NE 47TH ST. POMPANO BEACH FL 33064	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1945 Coral Point Drive Cape Coral FL 33990
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

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: [signature] President Laurel A Egan 4/20/02 941-574-8173
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #