FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jan 11, 2001 8:00 am Secretary of State DOCUMENT # P00000065621 ARCHITECTURE PLUS BY THE THE SEA, INC. 01-11-2001 90046 033 ***150.00 Principal Place of Business Mailing Address 1747 E GULF BEACH DRIVE 1747 E GULF BEACH DRIVE ST GEORGE ISLAND FL 32328 600718 ST GEORGE ISLAND FL 32328 3, Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number 59 3.656478 City & State Applied For City & State Not Applicable \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BURKE, LARRY R Street Address (P.O. Box Number is Not Acceptable) 1747 E GULF BEACH DRIVE ST GEORGE ISLAND FL 32328 Zip Code City 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, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible This corporation is eligible to describe Tax filling requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State --- ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (10/00) ☐ Change PRESIDENT Delete TITLE LARRY R. BURKE 1747 E. GULF BEACH DRIVE NAME NAME STREET ADDRESS STREET ADDRESS ST. GEORGE ISLAND, FL. 32328 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE A. NAME Y STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 of rusters made were diverged to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

R. BURKE

changed, or on an attach

SIGNATURE:

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