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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P01000021701 1. Entity Name 02 OCT -3 MI 11: 43 Littlefield Construction, Inc. SECRETARY OF STATE DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 1726 Green Meadow Lane 1726 Green Meadow Lane Suite. Apt. #, etc. Suite. Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Orlando Florida Applied For Orlando Florida 59-3733625 Not Applicable Country 32825 Country USA 32825 USA \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name Phillip Garris DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1726 Green Meadow Lane Orlando 32825 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 Superiore, types or privated name of registeriors again and one if application. (NOTE: Registered Agent signature required when reinstating) January 1 May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550:00 Tax fiting requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS THIS P/T/S NAME Phillip Garris STREET ADDRESS STREET ADDRESS 1726 Green Meadow Lane City-St-ZiP CR2E0348 CIIY: \$1.70° Orlando F1 32825E NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP NAME NAI/E STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY ST ZIP CIY SÎ DP~. THE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP mr NAME STREET ADDRESS STREET ADDRESS City-St-ZIP #⊓€ NAME STREET ADDRESS STREET ADDRESS ĊĹŶĿŜĹŊŔ^Ţ 13. Thereby 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0090,284

LITTLLEFIELD CONSTUCTION, INC.

\$73358 = PO1000021701

Florida Department of State Divisions of Corporations Reinstatement Department 409 E. Gaines Street Tallahassee, Fl. 32399

9-20-2002 Dear Divisions of Corporations,

I have not and did not receive my uniform business report for Littlefield Construction, Inc. in the mail. I have had consistent problems with mail service at this address 1726 Green Meadow Lane, Orlando Fl. 32825. Most of the time mail simply gets sent to the wrong address no the same street and mail sent to me is the wrong mail for people on the same street. However this year I did not received two important documents one was the URB and the other was my renewal for my State Contractor Licenses. Please reinstate Littlefield Construction, Inc. as to the fact I did not received my URB in the mail.

Thank You

Phillip Garris

President Littlefield Construction, Inc.