## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 13, 2002 8:00 am & Secretary of State P01000080426 DOCUMENT # 1. Entity Name BERNARD RILEY CONSTRUCTION, INC. Principal Place of Business Mailing Address 606 61ST AVE 606 61ST AVE VERO BEACH FL 32968 VERO BEACH FL 32968 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1134671 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RILEY, BERNARD Street Address (P.O. Box Number is Not Acceptable) 606 61ST AVE VERO BEACH FL 32968 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 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. ☐ Delete Change ☐ Addition TITLE TITLE RILEY, BERNARD NAME NAME 606 61ST AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-ZIP ☐ Addition Change | DST TITLE ☐ Delete TITLE RILEY, KAREN NAME NAME STREET ADDRESS STREET ADDRESS 606 61ST AVE CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-ZIP Addition ☐ Delete TITLE Change III.F. BEDFORD, FREDERICK NAME STREET ADDRESS 2071 5TH COURT SE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32962 Delete ☐ Change ☐ Addition TITLE DV NAME COB, KENNETH STREET ADDRESS STREET ADDRESS 1505 38TH AVE CITY-ST-ZIP VERÓ BEACH FL 32960 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE 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.

SIGNATURE: / SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR