2002 UNIFORM BUSINESS REPORT (UBR)

Jun 03, 2002 8:00 am Secretary of State P01000095024 DOCUMENT # 05-15-2002 90147 005 ***150.00 1. Entity Name HEARTLAND CONSTRUCTION OF CENTRAL FLORIDA, INC. Principal Place of Business Mailing Address 35121 HEARTLAND DR 35121 HEARTLAND DR DADE CITY FL 33523 DADE CITY FL 33523 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 *59*-374-8433 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAMPBELL, RICHARD B Street Address (P.O. Box Number is Not Acaptable) ONE HARBOUR PLACE 777 S HARBOUR ISLAND BLVD TAMPA FL 33601 City BROCKOULLE ement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity: TIMOTHY MAKTUCET SIGNATURE 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Delete (9/01) TITLE TITLE Treasura ☐ Change Addition NAME STUBBINS, STUART L NAME 35121 HEARTLAND DR STREET ADDRESS STREET ADDRESS CR2E034 DADE CITY FL 33523 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change MoitibbA [STUBBINS, CYNTHIA D NAME NAME STREET ADDRESS 35121 HEARTLAND DR STREET ADDRESS CITY-S7-7IP DADE CITY FL 33523 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.

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