Amend

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000107749

1. Entity Name

MUSKOGEE CREEK CONSTRUCTION I, INC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 SEP 20 AM 10:00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
404 Shaderville Rd	404 Shaderville Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Crawfordville, FL	City & State: Crawfordville, FL
Zip: 32327 Country: WAKULLA	Zip: 32327 Country: WAKULLA

DO NOT WRITE IN THIS SPACE

4. FEI Number 593756640 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Danyell Robison

Street Address (P.O. Box Number is Not Acceptable): 404 Shaderville Rd

City: Crawfordville FL Zip Code: 32327

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 _____ 9-19-02
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) ☑

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE	President
NAME	Joey Robison
STREET ADDRESS	404 Shaderville Rd
CITY-ST-ZIP	Crawfordville, FL 32327
TITLE	Vice President
NAME	Robert Robison
STREET ADDRESS	400 Shaderville Rd.
CITY-ST-ZIP	Crawfordville FL 32327
TITLE	Secretary
NAME	Danyell Robison
STREET ADDRESS	404 Shaderville Rd
CITY-ST-ZIP	Crawfordville, FL, 32327
TITLE	Director
NAME	Keith Gregory
STREET ADDRESS	96 Harry Morrison Rd
CITY-ST-ZIP	Crawfordville, FL. 32327
TITLE	Director
NAME	Tommy J Nazworthy Sr.
STREET ADDRESS	395 Shadrille Rd
CITY-ST-ZIP	Crawfordville, FL. 32327
TITLE	Director
NAME	Jason M Parker
STREET ADDRESS	931 Lower Bridge Rd.
CITY-ST-ZIP	Crawfordville, FL 32327

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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Robert L. Robison Sr. 9-19-02 591 7039
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — *Daytime Phone #