FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000016829 FILED 1. Entity Name 103 DEC -5 AM 9 32 MAURICE ALBRITTON CONSTRUCTION, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 700024103667 2. Principal Place of Business 3. Mailing Address 12/05/03 - 01048 - 014 Suite, Apt. #, etc. 909 East Albritton Rd. Suite, Apt. #, etc. Avon Park, Florida Applied For City & State 3625590 Not Applicable Country Country \$8.75 Additional $33\frac{20}{8}25$ 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name Thomas L. Nunnallee DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable)
325 North Commerce IN THIS SPACE Zip Code City Sebring 33870 purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. January 12 May 1. Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State 10, OFFICERS AND DIRECTORS CR2E034B (12/02) TITLE Albritton, Daniel G. NAME NAME STREET ADDRESS 4341 East Kevin Road Avon Park, FL 33825 STREET ADDRESS CITY-ST-ZIP Avon Park, CHY-SI-ZIP* VSTD TITLE NAME NAME Albritton, Marshall G. STREET ADDRESS STREET ADDRESS 97 Lake Byrd Blyd. Avon Park, FL 3382 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP* TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP-TITLE NAME STREET ADDRESS ZZANONA LEBITZ CITY-ST-21P TITLE MLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP 12. 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 10 or on an attachment with an address, with all other like empowered.