2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT

Principal Place of Business

changed, or on an attachment

SIGNATURE:

P02000099353

Mailing Address

1. Entity Name

TLM CONSTRUCTION SERVICES, INC.



Mar 28, 2003 8:00 am Secretary of State

Daytime Phone #

FILED

03-28-2003 90096 031 ***150.00

701 ENTERPRISE ROAD EAST 701 ENTERPRISE ROAD EAST SUITE 404 SAFETY HARBOR FL 34695 SAFETY HARBOR FL 34695 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEI Number City & State Applied For 27-0029715 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Patrick T. Campagna CAMPAGNA, PATRICK T Street Address (P.O. Box Number is Not Acceptable) 701 ENTERPRISE ROAD EAST <u>1864 Springbush Ln.</u> SUITE 404 SAFETY HARBOR FL 34695 City Zip Code Clearwater 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. President ☐ Delete TITLE Change Addition CAMPAGNA, PATRICK T NAME NAME Patrick T. Campagna STREET ADDRESS 701 ENTERPRISE ROAD EAST, SUITE 404 STREET ADDRESS 1864 Springbush Lane SAFETY HARBOR FL 34695 CITY-ST-ZIP CITY-ST-ZIP Clearwater, FL 33763 S.T. ☐ Delete TITLE TITI F Sec., Treas Change Addition CAMPAGNA, MICHAEL P NAME NAME Michael P. Campagna 701 ENTERPRISE ROAD EAST, SUITE 404 STREET ADDRESS STREET ADDRESS 109 Augusta Ave. CITY-ST-7IF SAFETY HARBOR FL 34695 CITY-ST-ZIP Palm Harbor, FL TITLE . Delete . TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-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 true appears in Block 10 or Block 11 if