2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 08, 2004 8:00 am Secretary of State DOCUMENT # P03000112890 1. Entity Name 04-08-2004 90031 026 ***150.00 IVEY CONSTRUCTION COMPAMY Principal Place of Business Mailing Address 3471 OLIN BAXLEY RD 3471 OLIN BAXLEY RD MIDDLEBURG FL 32068 MIDDLEBURG FL 32068 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 52-2404849 Not Applicable Zip Country 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 SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22 ST 4TH FL **MIAMI FL 33145** City Zip Code 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME IVEY, GEORGE E MAME 3471 OLIN BAXLEY RD STREET ADDRESS STREET ADDRESS MIDDLEBURG FL 32068 CITY-ST-ZIP CITY-ST-ZIP TITLE STD Change ☐ Addition Delete TITLE NAME IVEY, GEORGIA L NAME STREET ADDRESS 3471 OLIN BAXLEY RD STREET ADDRESS MIDDLEBURG FL 32068 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME - - -NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME ----NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET AODRESS

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George E.IVAY

FILED