2007 FOR PROFIT CORPORATION

\$ 120.

FILED Mar 29, 2007 8:00 am Secretary of State

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CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

SEBRING, FL 33872

1. Entity Name THE 124 BUILDING, INC. Principal Place of Business Mailing Address 40044359 124 TONEY PENNA DR C/O M. BRITTON 3218 BENTLEY AVE JUPITER, FL 33452 SEBRING, FL 33872 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 13674 S. W. FOUX Was Was Suite, Apt. #, etc. Suite, Apt. #, etc. 03172007 CR2E034 (12/06) Chg-P 4. FEI Number Applied For City & State 86-1092993 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired 3491.3cv3 . Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRITTON, MARY L 3218 BENTLEY AVE SEBRING, FL 33872 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. ☐ Change ★ Addition D ☐ Delete TITLE TITLE DODDS, JAMES H NAME NAME 3694 SW Four Wass Wag 11420 154 RD N JUPITER FARMS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER, FL 33478 ☐ Delete TITLE 71TLE DODDS, CHARLES R NAMÉ 12915 SE C.R. 234 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MICANOPY, FL 32667 ☐ Change ☐ Addition Delete TITLE DODDS, STEPHAN A NAME İVAMÊ STREET ADDRESS 8019 SW 95 ST STREET ADDRESS CITY-ST-ZIP GAINESVILLE, FL 32608 CITY-ST-ZIP Delete TITLE ☐ Addition TITLE HICKS, MARLENE D NAME NAME STREET ADDRESS 16201 NE HWY 301 STREET ADDRESS CITY-ST-ZIP WALDO, FL 32694 CITY-ST-ZIP Addition ☐ Delete TITLE BRITTON, MARY L NAME NAME 3218 BENTLEY AVE STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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-7IP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

☐ Delete

SIGNATURE: More Lee Britton 3-25-07 563-44-0608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARY LEE BRITTON

Date

Date