2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Secretary of State P11985 07-11-2003 90052 008 ***150 00 DOCUMENT # 06-27-2003 90051 048 ***400.00 BURRELL AND ASSOCIATES CONSTRUCTION COMPANY./IN Mailing Address Principal Place of Business 725 N. HIGHWAY ATA 725 N. HIGHWAT ATA CITE C-118 JUPITER PL 33477 JUPITER Pt 33477 2. Principal Place of Business 3. Mailing Address 2880 S.E. Downwinds Rd 2880 S.E. Downwinds Rd Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Jupiter City & State 4. FEI Number Applied For 74-2124980 Fla Jupiter Fla Not Applicable Country Zip 33478 \$8.75 Additional 5. Certificate of Status Desired USA 33478 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent L. M. BURRELL, JR Street Address (P.O. Box Number is Not Acceptable) 725 HWY ATA STE C-118-2880 S.E. Downwinds Road JUPITER-FL-33477 Jupiter 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. SIGNATURE Signature, typed occurred name of registered agent and title if applicable. DATE (NOTE: Repistered Agent signature required when reinstating) : FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees (Alake Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TIDE ☐ Change Addition PTD. BURRELL, L.M., JR. NAME NAME Burrell, L.M. Jr. 2880 S.E. Downwinds Foad Jupiter Fla. 33478 725 N HWY A1A, SUITE 0-118 STREET ADDRESS STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change TITLE Delete **VSD** Addition BURRELL, PAMELA R. NAME NAME Burrell, Palmea R 2880 S.E. Downwinds Road 725 N HWY ATA: SUITE C 118 STREET ADDRESS STREET ADDRESS JUDITER FL 23477 CITY-ST-ZIP CITY-ST-ZIP Jupiter Fla TITLE Delete TITLE ☐ Change ☐ Addition

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 it changed, or on an attachment with an address, with all other like empowered.

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