2001 UNIFORM BUSINESS REPORT (UBR) 03-27-2001 90657 044 ****61.25 06-14-2001 9to ED009 ****61.25 SECRET#930006280131E DOCUMENT # P93000028013 SMOTTA NOT THE HEREIVIE 1. Entity Name -MASTER CRAFT PLUMBING, INC. 01 JUN 28 AM 10: 11 Principal Place of Business Mailing Address 1110 Pine Island Rd., #11 1110 Pine Island Rd. #11 Cape Coral, FL 33909-Cape Coral, FL 33909 A0073143 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable 65-0401880 Zin 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 Name Michael G. Fink, Esq. Street Address (P.O. Box Number is Not Acceptable) 2030 McGregor Boulevard Fort Myers, FL 33901 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Ba Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE DP Change Addition NAME NAME Tull, Richard E., Jr. Tull, Richard E., Jr. STREET ADDRESS STREET ADDRESS 1110 Pine Island Rd. #11 1110 Pine Island Rd. #11 CITY-ST-ZIP CITY-ST-ZIP Cape Coral, FL 33909 Cape Coral, FL 33909 TITLE ☐ Delete TITLE ☐ Change Addition DVPT NAME NAME Rechnor, Charles STREET ADDRESS STREET ADDRESS 1110 Pine Island Rd. #11 CITY-ST-ZIP CITY-ST-ZIP Cape Coral, FL 33909 TITLE Delete TITLE ☐ Change ☐ Addition Fink, Michael G. (D) NAME NAME 2030 McGregor Boulevard STREET ADDRESS STREET ADDRESS Fort Myers, FL 33901 CITY-ST-ZIP CITY-ST-ZIP TITLE XX Detete TITLE Change ☐ Addition HAME NAME Shepherd, Laura F. STREET ADDRESS STREET ADDRESS 1110 Pine Island Rd. #11 CITY-ST-ZIP CITY-ST-ZIP Cape Coral, FL 33909 HILF ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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 path; that I am an officer or director of the corporation or the receiver or truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or tructe changed, or on an attachment in an area Richard E. Tull, Jr. 941 - 772 - 7200 IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #