2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Mar 14, 2001 8:00 am Secretary of State **DOCUMENT # P94000052909** ALLEN DAMRON CONSTRUCTION COMPANY 03-14-2001 90523 020 ***150.00 Principal Place of Business Mailing Address 7903 DARLINGTON CIRCLE 7903 DARLINGTON CIRCLE LAKELAND FL 33809 LAKELAND FL 33809 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3254799 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 Name BYWATER, JOSEPH G Street Address (P.O. Box Number is Not Acceptable) 2000 E EDGEWOOD DR. 108B LAKELAND FL 33803 City Zin Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Delete TITLE TITLE Change ☐ Addition DAMRON, DEBRA L NAME 7903 DARLINGTON CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33809 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition DAMRON, ALLEN NAME NAME STREET ADDRESS 7903 DARLINGTON CIRCLE STREET ADDRESS LAKELAND FL 33809 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE - Change Addition-DARMON, DEBRA L NAME NAME STREET ADDRESS 7903 DARLINGTON CIRCLE STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33809 CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME 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-7IP 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 11 or Block 12 if

EBRA LBAMRON 3-12-01 863-853