FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 21, 2002 8:00 am DOCUMENT # P94000066237 Secretary of State 1. Entity Name 02-21-2002 90131 024 ***150.00 GENESIS CONTRACTORS, INC. Principal Place of Business Mailing Address 2735 SANIBEL PLACE 2735 SANIBEL PLACE **GULF BREEZE FL 32561 GULF BREEZE FL 32561** 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 59-3267068 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 Name WIEDLE, CHARLES W Street Address (P.O. Box Number is Not Acceptable) -4868 CASA-GRANDE COURT MILTON FL 32583 8. The above named antity submits this stater ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 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 (9/01)TIALE ☐ Delete TITLE Change ☐ Addition WIEDLE, CHARLES W NAME 157 Mirabella Circle Pensacola. FL 32514 STREET ADDRESS 4368 CASA GRANDE COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MILTON FL TITLE ☐ Defete PD TITLE Addition NAME SPENCER, DEAN A NAME STREET ADDRESS 2735 SANIBEL PLACE STREET ADDRESS CITY-ST-7IP **GULF BREEZE FL** CITY-ST-7IP TITLE ٧Ď٠٠ ☐ Delete TITLE Change ☐ Addition NAME NAME SMALL, WILLIE E STREET ADDRESS 9190 STILLBRIDGE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32514 TITLE ☐ Delete ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition ☐ Change STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P 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(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

SIGNATURE: