2005 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000000710

1. Entity Name
R.L STACY CONSTRUCTION COMPANY

Attn Cathy Directors Office

Dept of State
409 East Gaines St.
Tallahassee, Fl
32399
Attn: Annual Report Section

FILED
05 MAY -2 PM 5:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2830 S.E. 31ST ST.
OCALA FL 34471

Mailing Address
2830 S.E. 31ST ST.
OCALA FL 34471

2. Principal Place of Business
3. Mailing Address

Suite, Apt #, etc.
City & State
Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3285164

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STACY, RALPH L
2830 S.E. 31ST ST.
OCALA FL 34471

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)

FILED
05 MAY -2 PM 5:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. [illegible]

SIGNATURE

9. [illegible] (See [illegible] on back)

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election [illegible] Trust Fund Contribution — $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP
NAME	STACY, RALPH L
STREET ADDRESS	2830 SE 31ST ST
CITY-ST-ZIP	OCALA FL 34471
TITLE	TS
NAME	STACY, NANCY
STREET ADDRESS	2830 SE 31ST ST
CITY-ST-ZIP	OCALA FL 34471

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

900054017259
05/06/05--01072--018 **150.00

[signature] 5/2

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

SIGNATURE: Nancy Stacy Nancy Stacy 1/30/02 352-694-3088

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #