2001 UNIFORM BUSINESS REPORT (UBR)

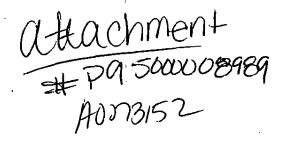
Jun 14, 2001 8:00 am DOCUMENT # P95000008989 **Secretary of State** 1. Entity Name 06-14-2001 90012 049 ***150.00 ADVANCED DECKING, INC. Principal Place of Business Mailing Address 641 OAKFORD RD. 641 OAKFORD RD. ZCICIUUN SARASOTA FL 34240 SARASOTA FL 34240 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0559809 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 HANNON, CHARLES W Street Address (P.O. Box Number is Not Acceptable) 4931 82ND PLACE EAST BRADENTON FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 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 TITLE Delete TITLE ☐ Change Addition HANNON, CHARLES W NAME NAME 2212 OUTER DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34231 CITY-ST-ZIP VSTD TITLE [] Delete ☐ Change Addition VAN FLEET, PERRY NAME STREET ADDRESS 641 OAKFORD RD. STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34240 CITY-ST-ZIP TITLE Delete TITI F ☐ Change Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME 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(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.

Konnapl

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:



June 7, 2001

Department of Florida State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: FEI Number: 65-0559809

Gentlemen:

Please find enclosed my 2001 Uniform Business Report.

I realized it is past the due date, however, a new postman could not locate Advanced Decking, Inc., because this mail is received at my home address. This mail was rerouted by the post office to an old address, but took six (6) weeks to arrive.

Based on the postal error, I would appreciate abatement of the late payment fee.

Thanking you in advance for your consideration. I remain,

Sincerely,

Charles W. Hannon

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