FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 21, 2002 8:00 am DOCUMENT # P96000075794 **Secretary of State** 1. Entity Name 02-21-2002 90070 018 ***158.75 NEW CENTURY BUILDERS INC. Principal Place of Business Mailing Address 5701 PIERCE DR N.E. 5701 PIERCE DR N.E. SAINT PETERSBURG FL 33703 #A570 SAINT PETERSBURG FL 33703 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 59-3397581 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CRADY, WILLIAM G JR Street Address (P.O. Box Number is Not Acceptable) 5071 PIERCE DR. N.E. SAINT PETERSBURG FL 33703 Zip Code City 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 (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 12. TITLE PD ☐ Delete TITLE Change ☐ Addition CR2E034 (9/01 NAME CRADY, WILLIAM G JR NAME 5701 PIERCE DRIVE N.E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33703-2545 CITY-ST-ZIP ☐ Addition TITLÉ ☐ Delete ☐ Change TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition □ Defete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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-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