2000-UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P9700004269 Jul 19, 2000 8:00 am Secrétary of State CARLAN Killam Construction Service's Inc. 07-19-2000 90010 030 ***550 00 Principal Place of Business Mailing Address 5111 NORTH 12TH AVENUE 81 WYMAN STREET PENSACOLA FL 32504 WALTHAM MA 02254) (1811 | **181**1 | 1814 | 1814 | **18**14 | **18**14 | 1814 | 1815 | 1816 | 1816 | 1816 | 1816 | 1816 | 1816 | 1816 | 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State - City & State --4: FEI Number 59-3429029 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 07.454 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. 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 Change ☐ Addition TITLE TITLE Delete CARLAN, CHARLES H NAME NAME STREET ADDRESS 5111 NORTH 12TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32504 D ☐ Delete Change ☐ Addition TITLE APPLETON, JOHN P NAME NAME 85 First Ave. , STREET ADDRESS 81 WYMAN STREET STREET ADDRESS 02454 CITY-ST-ZIP WALTHAM MA 02254 CITY-ST-ZIP Addition TITLE Delete TITLE AGHABABIAN, ROBERT NAME STREET ADDRESS 81 WYMAN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WALTHAM MA 02254 02454 ☐ Delete □ Change Addition TITLE THE LAMBERT, SANDRA L NAME NAME STREET ADDRESS 81 WYMAN STREET STREET ADDRESS CITY-ST-ZIP CITY - ST-7IP WALTHAM MA 02254 02454 Addition TITLE ☐ Delete TITLE APICERNO, KENNETH NAME: NAME STREET ADDRESS 81 WYMAN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WALTHAM MA 02454 ☐ Addition ☐ Delete Change Ch TITLE TITLE HOOGASIAN, SETH H NAME NAME STREET ADDRESS 81 WYMAN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WALTHAM MA 02254

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: POST AGNA DAD TO THE US OF THE TOR

7-13-00

(751)622-1000

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