Jun 18, 2002 8:00 am 2002 UNIFORM BUSINESS REPORT (UBR) Secretary of State DOCUMENT # P97000041046 1. Entity Name 06-18-2002 90484 025 ***150 00 PRECISION PAVERS TRI-COUNTY, INC. فتنتشمه بالمرادي والمرادي والمرادية Principal Place of Business Mailing Address 809343 2021 TALLEVAST RD 2021 TALLEVAST RD. SARASOTA FL 34243 SARASOTA FL 34243 US 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 65-0763649 Not Applicable Zip Country Zip 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 Ozark, Damian M Street Address (P.O. Box Number is Not Acceptable) 2808 MANATER AVE WEST **BRADENTON FL 34205** 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 eignature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fee: Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE (9/01) ☐ Change ☐ Addition NAME VOCKE, JUDY K NAME STREET ADDRESS 2021 TALLEVAST RD STREET ADDRESS CR2E034 CITY-ST-ZIP SARASOTA FL 34243 CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME ROBERTS, DALE E NAME STREET ADDRESS 2021 TALLEVASI ROAD STREET ADDRESS CITY-ST-71P Sarasota Fl 34248 CITY-ST-ZIP TITLE D Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS 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 IIILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

3. 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

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED



Affachment + 869325

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

May 30, 2002

PRECISION PAVERS TRI-COUNTY, INC. 2021 TALLEVAST RD. SARASOTA, FL 34243

Subject: PRECISION PAVERS TRI-COUNTY, INC.

Reference Number:

P97000041046

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The check submitted is not payable to this office. Please make your check payable to the Department of State.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000:

/jg ANNUAL REPORTS SECTION