2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2001 8:00 am DOCUMENT # P97000041586 Secretary of State 1. Entity Name CANFIELD CONSTRUCTION, INC. 05-14-2001 90086 045 ***150.00 Principal Place of Business Mailing Address 18800 SUGARBERRY LANE 18800 SUGARBERRY LANE 100000 SPRING HILL FL 34610 SPRING HILL FL 34610 2. Principal Place of Business 3. Mailing Address 1402 ANGELO 140a Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3443123 10RT Not Applicable 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 Name CANFIELD. RUSSELL Street Address (P.O. Box Number is Not Acceptable) 18800 SUGARBERRY LANE SPRING HILL FL 34610 ANGEL y submits this statement for the oursee of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named 4-28-200 SIGNATURE (NOTE: Registered Agent signature required when reinstating) and title if applicable 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PTSD TITLE Delete TITLE ANFIELD, RUSSELL CANFIELD, RUSSELL NAME NAME 18800 SUGARBERRY LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SPRING HILL FL 34610 Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST, ZIP Change | ■ Addition TITLE ☐ Delete TITLE 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 attachm, SIGNATURE: // 4-78-201 727-574-2898