2001 UNIFORM BUSINESS REPORT (UBR) Apr 25, 2001 8:00 am Secretary of State DOCUMENT # P98000002768 1. Entity Name INDIAN RIVER CUSTOM HOMES, INC. 04-25-2001 90226 001 ***300.00 Principal Place of Business Mailing Address 4680 N US #1 4680 N US #1 GRAND HARBOR PLAZA GRAND HARBOR PLAZA 38770 VERO BEACH FL 32967 VERO BEACH FL 32967 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0806526 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NACION, JIM Street Address (P.O. Box Number is Not Acceptable) 3665 3RD PLACE VERO BEACH FL 32968 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent 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 After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) / Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change ☐ Addition PD ☐ Delete TITLE TITLE NACION, JIM NAME NAME STREET ADDRESS 3665 3RD PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32968 ☐ Defete ☐ Change Addition TITLE FRANCO, WENDY NAME NAME STREET ADDRESS STREET ADDRESS 5155 N A1A-UNIT-311C CITY-ST-ZIP CITY-ST-ZIP FT PIERCE FL 34949 ☐ Change Addition ☐ Delete TITLE TITLE FRANCO, NICHOLAS D NAME NAME STREET ADDRESS 5155 N. AIA UNIT 311C STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT PIERCE FL 34949 ☐ Addition TITLE ☐ Change ☐ Delete TITLE NAME

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

STREET ADDRESS CITY-ST-ZIP

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WENDY TRANCO 4-10-01 561-770-991

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