

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90183 001 ***150.00

0004302 AV

DOCUMENT # P98000007896

1. Entity Name
SITE-TECH CONSTRUCTION, INC.



Principal Place of Business
**RT. 5 BOX 4260
LAKE BUTLER FL 32054**

Mailing Address
**RT. 5 BOX 4260
LAKE BUTLER FL 32054**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **59-3507354**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**METCALF, DAVID J
2066 THOMASVILLE ROAD
TALLAHASSEE FL 32312**

7. Name and Address of New Registered Agent

Name **Stephen Hendricks**
Street Address (P.O. Box Number is Not Acceptable)
Rt. 5 Box 4260
City **LAKE BUTLER** FL Zip Code **32054**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Stephen Hendricks* DATE **MARCH 5, 2003**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing, Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HENDRICKS, JASON	
STREET ADDRESS	RT 4 BOX 3705	
CITY-ST-ZIP	LAKE BUTLER FL 32054	
TITLE	P	<input type="checkbox"/> Delete
NAME	HENDRICKS, STEPHEN	
STREET ADDRESS	RT 5 BOX 4260	
CITY-ST-ZIP	LAKE BUTLER FL 32054	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	SMITH, WAYNE	
STREET ADDRESS	RT. 5 BOX 4260	
CITY-ST-ZIP	LAKE BUTLER FL 32054	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stephen Hendricks* DATE **3/5/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(386) 496-2174

CR2E034 (10/02)