## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 7980000 74685  1. Entity Name  Morrell Construction Co. of N. W. Florida			filed			
Morrell Construction	rrell Construction Co. of N.W. Florida			05 JUN 10 PM 15: 145		
			- Ar now to b	WIS: 45		
DO NOT WRITE IN THIS SPACE			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business     3. Mailing Address			_		•	
Suite, Apt. #, etc. 9221 Windsong Ln. Suite, Apt. #, etc. 922( Windso		one ( in	DO NOT WRITE IN THIS SPACE			
City & State  Prosacola . Fl	City & State Pensa Cola, El		4. FEI Number Applied For Sy 35 3 2 2 8 3 Not Applicable		Applied For Not Applicable	
Zip Country 32534 US.A.	Zip			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required		
367.07 43.017	7. Name and Address of Current Registered Agent					
DO NOT MOITE			ry R. Morrell ss (P.O. Box Number is Not Accep	P.O. Box Number is Not Acceptable)		
IN THIS SPACE 9727			Windsong, Ln	·		
	nsarola	FL	Zip Code 32.534			
8. The above named entity submits this statement for	or the purpose of changing its re			of Florida.		
SIGNATURE Square protect some of registered agent	and tille Concepte (NOTE: 5	Registered Agent signature req	uired when reinstalling)	5-3-	-02	
9. This correction is eligible to satisfy its Intendible January 1 - May 1 Fee is \$150.00						
Tax filing requirement and elects to do so.  Amended L  Amended L		, Fee Is \$550.00 UBR Is \$61.25	10. Election Campaig Trust Fund Contri		\$5.00 May 8e Added to Fees	
11. OFFICERS AND	Make Check Payable DIRECTORS	to Department or :	otate	····		
me President		TITLE		059064	1791 <u>ĝ</u>	
NAME STREET ADDRESS CITY-ST-ZIP  9221 Windsons in Pensacolu, KI		NAME Street Address		3/21/0201 **150.00 □	012006   E ****150,00   異	
		CITY-ST-ZIP		**:30.00 359064		
TITLE NAME		TITLE NAME	-08	5/21/0201		
STREET ADDRESS CITY-ST-ZIP			<b>米</b> 達	**150.00 ·	****150.00	
πιε		TITLE		- Mind		
NAME STREET ADDRESS		NAME STREET ADDRESS	DO 110		_	
		CITY-ST-ZIP	DO NO	T WRITE	<b>-</b>	
TITLE NAME		TITLE NAME	IN THIS	S SPACE		
STREET ADDRESS	<u></u>	STREET ADDRESS		<del>- ^</del>		
CITY-ST-ZIP		CTY-ST-ZIP	, , ,			
NAME		NAME				
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP			0	
TITLE		THTLE				
NAME . STREET ADDRESS		NAME STREET ADDRESS			1	
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 on an attachment with an address, with all other like empowered.						
SIGNATURE: 4-23-02 (850) 471-1195						
	POUTED HAVE OF BROWNS OFFICED OF	PERCATOR		- Various	Phase I	