2002 UNIFORM BUSINESS REPORT (UBR)

Apr 16, 2002 8:00 am § Secretary of State ... DOCUMENT # P99000017472 1. Entity Name CUSTOM HARDWOOD FLOORS OF CHIPLEY, INC. Principal Place of Business Mailing Address 3103 SEMINOLE ROAD 3103 SEMINOLE ROAD PARABORULT CHIPLEY FL 32428 CHIPLEY FL 32428 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 59-3568288 Not Applicable Zip -- -- Country Zip: 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 BLUE, ROB JR Street Address (P.O. Box Number is Not Acceptable) 221 MCKENZIE AVENUE PANAMA CITY FL 32401 Zip Code City FL 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 DATE 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 OFFICERS AND DIRECTORS 11. ☐ Change Addition ☐ Delete TITE F TITLE DΡ NAME NOSS, RONALD NAME STREET ADDRESS STREET ADDRESS 3103 SEMINOLE ROAD CITY-ST-ZIP CITY-ST-ZIP CHIPLEY FL 32428 VΡ ☐ Addition ☐ Change TITLE VΡ ☐ Delete TITLE NAME NAME NOSS, RONALD & III NOSS, RONALD A II STREET ADDRESS STREET ADDRESS 3026 SEMINOLE ROAD 3026 SEMINOLE ROAD CITY-ST-ZIP CITY-ST-ZIP CHIPLEY FL 32428 CHIPLEY, FL 32428 Addition · Change ☐ Delete TITLE TITLE NAME NAME NOSS, MARY STREET ADDRESS STREET ADDRESS 3103 SEMINOLE ROAD CITY-ST-ZIP CITY-ST-ZIP CHIPLEY FL 32428 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME NOSS, ISAAC J STREET ADDRESS STREET ADDRESS 3207 PALM BLVD CITY-ST-ZIP CITY-ST-ZIP CHIPLEY FL 32428 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

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 eath; 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.

CITY-ST-ZIP

CITY-ST-ZIP

Mary M. Noss

Mary m. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR April 5,2002

850-638-4528

FILED

Daytime Phone #