FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P9900036562 1. Entity Name BURRIS CONSTRUCTION Company 229 Boscoe BIVOL Middleburg Fl. 32068				FILED 05 APR 25 AM II: 02	
DO NOT WRITE IN THIS SPACE				SEURETARY OF FALLAHASSEE, F	LORIDA
2. Principal Place of Business 229 Boscoe Blvd . 3. Mailing Address 229 Boscoe Suite, Apt. #, etc. Suite, Apt. #, etc.			Blud.	DO NOT WRITE IN THIS SPACE	
City & State Middle Zip	e burg Country	City & State Middlebuog Zip 32068	Country	4. FEI Number 59 - 35 89 238 5. Certificate of Status Desired □	Applied For Not Applicable \$8.75 Additional Fee Required
DO NOT WRITE IN THIS SPACE			7. Name and Address of Current Registered Agent Name Thomas, William Je. Street Address (P.S. Box Number in Not Acceptable) 2301 Park Avenue Suite 404 City Drange Park FL Zip Code 32073		
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. 70015412627 05/10/0501010025 **150.00					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating) January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$51.25 Make Check Payable to Florida Department of State (NOTE: Registered Agent aignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D B. DDIS, GlENC 229 BOSCOE BIND MIDDLE BURG. FI.	32068	TITLE NAME STREET ADDRESS CITY-SY-ZIP		
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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 on an attachment with an address, with all other like empowered.					
SIGNATURE: Sherry Buris - Sherry BURRIS 4-15-2005 / 272-4265					