## 2J01 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Mar 12, 2001 8:00 am Secretary of State DÓCUMENT # P99000039915 SOUTHERN ARCHITECTURAL SERVICES, INC. 03-12-2001 90454 049 \*\*\*150.00 Mailing Address Principal Place of Business 4152 WEST BLUE HERON BLVD., SUITE +1+4 4152 WEST BLUE HERON BLVD.. SUITE 114 STE1114 STE1114 RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0967476 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent J. Baymona BROOME, WILLIAM R.H. Street Address (P.O. Box Number is Not Acceptable) 1818 AUSTRALIAN AVENUE SOUTH SUITE 202 WEST PALM BEACH FL 33409 Zip Code 33 ዛሪ 8. The above named entity submits this statement for the purpose of changing it steps of state of registered agent, or both, in the State of Florida. 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. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change ☐ Addition ☐ Delete TITLE TITLE TRIMBLE, DAVID L NAME STREET ADDRESS 4152 WEST BLUE HERON BLVD., SUITE 114 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **RIVIERA BEACH FL 33404** ☐ Change ☐ Addition ☐ Delete TITL F TITLE NAME JAUDON, FREDERICK W NAME STREET ADDRESS STREET ADDRESS 4152 WEST BLUE HERON BLVD., SUITE 114 CITY-ST-ZIP CITY-ST-ZIP RIVIERA BEACH FL 33404 ☐ Addition ☐ Change TITLE TITLE Delete BLOUNT, GLEN DR.... NAME NAME STREET ADDRESS STREET ADDRESS 4152 WEST BLUE HERON BLVD., SUITE 114 CITY-ST-ZIP CITY-ST-ZIP **RIVIERA BEACH FL 33404** ☐ Addition ☐ Change TITLE Delete TITLE BERRY, G. RAYMOND NAME NAME STREET ADDRESS STREET ADDRESS 4152 WEST BLUE HERON BLVD., SUITE 114 CITY-ST-ZIP CITY-ST-ZIP RIVIERA BEACH FL 33404 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 traiting amount of the corporation or the receiver or traiting amount of the corporation of the corporation or the receiver or traiting amount of the receiver or traiting amount of the corporation or the receiver or traiting amount of the receiver of the receiver of the receiver of the receive

RAYMOND BERRY

IGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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