Amendment to Report (UBR)

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05-22-2001 90030 003 ****61.25

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DO NOT WRITE IN THIS SPACE

DOCUMENT #

1. Entity Name

NEW South Construction Corp.

Principal Place of Business	Mailing Address
Punta Gorda Fl.	351 Chasteen St Punta Gorda Fl 33950

2. Principal Place of Business	3. Mailing Address
Ft Ogden/Punta Gorda	
Suite, Apt. #, etc.: PO Box 66	Suite, Apt. #, etc.
City & State: Ft Ogden Fl	City & State
Zip: 34267 Country: DeSoto	Zip Country

4. FEI Number: 65-0940784 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent
Ron Jones 10897 S.W. C.R 761 Ft Ogden Fl 34267	mailing PO Box 66 Ft Ogden Fl 34267	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Ron Jones 10897 S.W.C.R 761 Ft Ogden Fl 34267	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Ralph Jones 1425 Amelia Ave Charlotte Harbor Fl 33980	☑ Delete	Vice President Edward Sherkus 2194 Blaser St. Pt. Charlotte Fla. 33954	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Tara Welles Jones 10897 SWCR 761 Ftogden Fl 34267	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (11/00)

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

SIGNATURE: Ronald A. Jones Ronald A. Jones 5/1/01 941 380-0835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #