

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91327 023 ***150.00

DOCUMENT # P99000087236
1. Entity Name
mike Rushing Construction Co.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
902 N. Pearl St.
Suite, Apt. #, etc.

3. Mailing Address
902 N. Pearl St.
Suite, Apt. #, etc.

City & State
Crestview, FL

City & State
Crestview, FL

Zip
32536

Country
USA

Zip
32536

Country
USA

4. FEI Number
59-3602611

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Michael F. Rushing

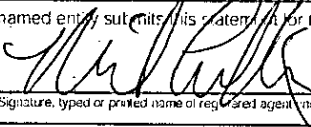
Street Address (P.O. Box Number is Not Acceptable)
902 N. Pearl St.

City
Crestview

City
FL

Zip Code
32536

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  Michael F. Rushing

Signature, typed or printed name of registered agent (and fee, if applicable) (NOTE: Registered Agent Signature required when re-appointing)

DATE
4-30-02

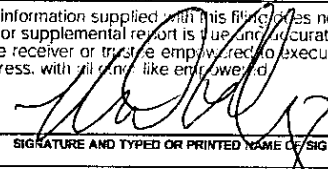
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Michael F. Rushing 4678 Lovegrass Lane Crestview, FL 32539	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President Clinton Rushing 578 Buckhorn Lane Crestview, FL 32536	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary/Treasury Sara Rushing 4678 Lovegrass Lane Crestview, FL 32539	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 employed 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 my like employees.

SIGNATURE:  Michael F. Rushing/President/1/30/02 850-423-1354

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)