FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 10, 2000 8:00 am Secretary of State DOCUMENT # **P99000087554** GUNTER CONSTRUCTION SERVICE, INC. 05-10-2000 90133 028 ***150.00 Principal Place of Business Mailing Address 4300 BAYOU BLVD. STE 13 4300 BAYOU BLVD, STE 13 00047446 PENSACOLA FL 32503-2671 PENSACOLA FL 32503 2. Principal Place of Business 3. Mailing Address P.O. Box 10038 7465 N. Old Palafox Street Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State Pensacola, Florida 59-3602339 Not Applicable Pensacola, Florida Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 32524 32503 Escambia Escambia ... Fee Required ... 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FLEMING, EDWARD P Street Address (P.O. Box Number is Not Acceptable) 4300 BAYOU BLVD, STE 13 PENSACOLA FL 32503 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 DATE (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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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. 12. ΡD ☐ Addition ☐ Delete TITLE TITLE NAME Gunter, Donald Lee NAME STREET ADDRESS STREET ADDRESS 901 Brandermill Drive CITY-ST-ZIP CITY-ST-ZIP Cantonment, FL 32533 Addition ☐ Change TITLE TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

SIGNATURE: Donald Lee Gunter Discoulte Signature and type of PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #

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