2001 UNIFORM BUSINESS REPORT (UBR)

May 17, 2001 8:00 am Secretary of State DOCUMENT # P99000097803 1. Entity Name 05-17-2001 90385 020 ***150.00 BK CONSTRUCTION CO., INC. Principal Place of Business Mailing Address 12232 LYNDELL PLANTATION DRIVE 12232 LYNDELL PLANTATION DRIVE PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL 32407 B0056331 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-3608530 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KEHL, BRIAN J Street Address (P.O. Box Number is Not Acceptable) 12232 LYNDELL PLANTATION DRIVE PANAMA CITY BEACH FL 32407 City 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) 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 (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE ☐ Change ☐ Addition ☐ Delete TITLE KEHL, BRIAN J NAME NAME STREET ADDRESS STREET ADDRESS 12232 LYNDELL PLANTATION DRIVE CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BEACH FL 32407 Change ☐ Addition Delete TITLE TITLE NAME KEHL, STACY L NAME STREET ADDRESS STREET ADDRESS 12232 LYNDELL PLANTATION DRIVE CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BEACH FL 32407 Change Addition ☐ Delete TITLE TITLE KEHL, CORY M NAME NAME STREET ADDRESS STREET ADDRESS 4005 OCEAN ST CITY-ST-ZIP CITY-ST-ZIE PANAMA CITY FL 32408 Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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:

O TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Stacy L. Kehl

4/30/0

(850)233-4833

Daytime Phon

FILED