19355 PINE GLEN DRIVE

FT. MYERS FL

STREET ADDRESS

CITY-ST-ZIP

FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00 Feb 03 1998 8:00am PROFIT FLORIDA DEPARTMEN') F STATE CORPORATION Sandra B. MorAM Secretary of State ANNUAL REPORT Secretary of St¹ 1998 DIVISION OF CORPORTIONS DOCUMENT # V06890 (0) GULF ISLAND PIPE, INC. Principal Place of Business Mailing Address 2340 BRUNER LANE 2340 BRUNER LANE FT MYER6 FL 33912 FORT MYERS FL 33912 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/15/1992 Applied For 2. Principal Place of Business 2a. Mailing Address 13160 RICKELIEB, KER PKWY 13/60 RICKENBACKER PKWY Suite, Apl. #, etc. Not Applicable 65-0310236 21 \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State \Box Added to Fees Trust Fund Contribution 23 This corporation owes or has paid the current year Intangible Yes ☐ No Personal Property Tax due June 30. 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name JUNGERS, CARL Street Address (P.O. Box Number is Not Acceptable) 9315 WINDLAKE DRIVE FT. MYERS FL 33912 Zip Code City ove-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered ites. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the
office or registered agont, or both, in the State of Florida. Such change was authoriz
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Sta SIGNATURI Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 FFICERS AND DIRECTORS 12 13 Change Addition Ρī DELETE TITLE JUNGERS, CARL 121 NAME 9315 WINDLAKE DR 1.3 SIEET ADDRESS STREET ADDRESS 1.4 DIY-ST-ZIP FT MYERS FL CITY-ST-ZIP Addition Change DELETE DAVID JUNGERS 2.1 TILE TITLE 3710 SUNLIND 2.2 NAME JUNGERS, PATRICIA 2.3 STREET ADDRESS STREET ADDRESS 9315 WINDLAKE DR. ESTERO, PL33928 FT. MYERS FL 2.4 C#Y-ST-ZIP CITY-ST-ZIP Change Addition DELETÉ 3.1 TILE TITLE JUNGERS, DANIEL NAME JUNGERS, DANIEL 3.2 NAME 22178 SEASHONE LINCLE 3.3 STREET ADDRESS 12314 EQUISTROIN DR. STREET ADDRESS ESTERO, FL 33929 FT. MYERS FL CITY-ST-ZIP 3.4. CITY - ST- ZIP Addition Change DELETE 4.1 TITLE TITLE DOUG JUNGERS 4 2 NAME O'BRIEN, JAMES NAME ROCERSVILLE, MO65742 9315 WINDLAKE DRIVE 4.3 STREET ADDRESS STREET ADDRESS FORT MYERS FL 4 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE TRUEX. ALAN 5.2 NAME NAME 8457 WREN ROAD 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY - ST - ZIP FORT MYERS FL CITY-ST-ZIP Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME JAMESON, PHILLIP NAME

6.3 STREET ADDRESS

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed of an an attachment with an address.