2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

V36797

1. Entity Name

VAN EMMERIK CONSTRUCTION, INC.



FILED Feb 27, 2003 8:00 am Secretary of State
02-27-2003 90116 047 ***150.00

Principal Plac 4324 SW 7TH CAPE CORAL US	PLACE FL 33914	Mailing Address 4324 SW 7TH PLACE CAPE CORAL FL 33914 US				
2. Principal Place of Business Z5170 Roland Lane Z5170 Roland			land Lane			
Suite, Apt.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & Stat		City & State	19 FL	4. FEI Number 65-0333561 Applied For Not Applicable		
Zip 33°		33955	Country	5. Certificate of Status Desired S8.75 Additional Fee Required		
	6. Name and Address of Curr	ent Registered Agent		7. Name and Address of New Registered Agent		
VAN EMMERIK, CHRISTOPHER L			Name Street Ad	Name Street Address (P.O. Box Number is Not Acceptable)		
4324 SW 7TH PLACE CAPE CORAL FL 33914						
			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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
10.	OFFICERS A	ND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VANEMMERIK, CHRISTOPHEI 4324 SW 7TH PLACE CAPE CORAL FL 33914	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	VANEMMERIK, Chirsopher Thange Addition 25170 Roland Lane Punta Godg FL 33955		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VANEMMERIK, DEANNA 4324 SW 7TH PLACE CAPE CORAL FL 33914	☐ Delete	TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	VANERMENT Deanny Schange Addition 25170 Roland Land Ping Gorda FL 33755		
NAME STREET ADDRESS CITY-ST-ZIP	And the second s	- Delete	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		
TITLE NAME STREET AODRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: