

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90150 039 ***150.00

DOCUMENT # 231679

1. Entity Name
FRANK C. DECKER CONSTRUCTION CO.

Principal Place of Business

~~1818 HARDEN BLVD~~
~~LAKELAND FL 33803~~

Mailing Address

PO BOX 2454
LAKELAND FL 33806

2. Principal Place of Business

521 HOWARD Ave.

3. Mailing Address

Suite, Apt. #, etc.

City & State

LAKELAND, Florida

City & State

Zip

Country

33815

USA

Zip

Country

4. FEI Number

59-0878274

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

~~DECKER, FRANK C~~
~~1818 HARDEN BLVD~~
~~LAKELAND FL 33803~~

7. Name and Address of New Registered Agent

Name **SCOTT BROWN, Esq.**

Street Address (P.O. Box Number is Not Acceptable)

816 W. MARTIN LUTHER KING Blvd.

City

TAMPA,

FL

Zip Code

33603

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 **SCOTT BROWN, Esq.**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-11-02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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 **STD** ☒ Delete
NAME **TAYLOR, GALE L**
STREET ADDRESS **1818 HARDEN BLVD.**
CITY-ST-ZIP **LAKELAND FL 33803**

TITLE **PD** ☐ Delete
NAME **DECKER, FRANK C**
STREET ADDRESS **1818 HARDEN BLVD.**
CITY-ST-ZIP **LAKELAND FL 33803**

TITLE **VP** ☐ Delete
NAME **DECKER, JOYCE O**
STREET ADDRESS **1818 HARDEN BLVD.**
CITY-ST-ZIP **LAKELAND FL 33803**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP/S/D** ☒ Change ☐ Addition
NAME **DECKER, JOYCE O.**
STREET ADDRESS **521 HOWARD AVENUE**
CITY-ST-ZIP **LAKELAND, FL 33815**

TITLE ☐ Change ☒ Addition
NAME **SCOTT BROWN - VP**
STREET ADDRESS **816 W. Martin Luther King Blvd.**
CITY-ST-ZIP **TAMPA, FL 33603**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

JOYCE O. DECKER - Vice President
JOYCE O. DECKER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

803-251-9669

Daytime Phone #

CR2E034 (9/01)