## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 22, 2000 8:00 am Secretary of State D@CUMENT # 288688 1. Entity Name ORANGE STATE STEEL CONSTRUCTION, INC. 03-22-2000 90182 040 \*\*\*150.00 Principal Place of Business Mailing Address 6201 80TH AVE N 6201 80TH AVE N PINELLAS PARK FL 33781 PINELLAS PARK FL 33781-2204 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1086910 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOYNER, REX A Street Address (P.O. Box Number is Not Acceptable) -6721-- -15TH-AVE-NORTH- -<u> 1309 - Park Street North</u> -ST-PETERSBURG-FL-33781 -Zip Code City st Petersburg 33710 submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity J6vner President (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, 2000 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 11. OFFICERS AND DIRECTORS 12. TITLE Change Addition D TITLE ☐ Delete KLEINFELDER, CRAIG NAME NAME STREET ADDRESS 6690 99TH AVENUE NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK FL 33782 Change ☐ Addition ☐ Delete TITLE TITLE MCGEORGE, PAMALA P. NAME NAME STREET ADDRESS STREET ADDRESS 8301 54TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK FL ☐ Change ☐ Addition TITLE TITLE ☐ Delete POWELL, JOEL P. NAME NAME STREET ADDRESS STREET ADDRESS 1992 74TH STREET NORTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33710 Change Addition TITLE Delete TITLE POWELL, CHRISTOPHER A. NAME STREET ADDRESS STREET ADDRESS 6710 15TH AVE. NO. CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33710 TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME JOYNER, REX A. NAME STREET ADDRESS STREET ADDRESS 6721 15TH AVE., NORTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33710 Change ☐ Addition ☐ Delete TITLE TITLE POWELL, CARL JR NAME NAME STREET ADDRESS STREET ADDRESS 7101 2ND AVE N CITY-ST-ZIP CITY-ST-7IP ST PETERSBURG FL 33710

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:

ED OF PRINTED NAME OF SIGNING OF