

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90116 030 ***150.00

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DOCUMENT # **680441**

1. Entity Name
RUNK CONSTRUCTION COMPANY



Principal Place of Business
RUNK CONSTRUCTION
1985 MIZELL ROAD
ST AUGUSTINE FL 32080
US

Mailing Address
RUNK CONSTRUCTION
1985 MIZELL ROAD
ST AUGUSTINE FL 32080
US



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
City & State

Zip Country Zip Country

4. FEI Number **59-2016298**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUNK, ARTHUR H., JR
1985 MIZELL ROAD
ST AUGUSTINE FL 32080

Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	RUNK, ARTHUR H., JR.	
STREET ADDRESS	235 S MATANZAS BLVD	
CITY-ST-ZIP	ST. AUGUSTINE FL 32080	
TITLE	TD	<input type="checkbox"/> Delete
NAME	RUNK, CHRISTOPHER	
STREET ADDRESS	9 VERSAGGI DR.	
CITY-ST-ZIP	ST. AUGUSTINE FL 32080	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	RUNK, PAUL B	
STREET ADDRESS	344 REDWING LANE	
CITY-ST-ZIP	ST. AUGUSTINE FL 32080	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Arthur H. Runk, Jr.* **ARTHUR H. RUNK, JR.** P. **21 Apr 03** **904-471-8272**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)