2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

F02000004038 DOCUMENT

1. Entity Name

Principal Place of Business

TWG CONSTRUCTION COMPANY, INC.



FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90119 008 ***150.00

40018243									
CHECK HERE IF MAKING CHANGES									
Number 46-1400500	Applied For								

5786 WIDEWATERS PARKWAY 5786 WIDEWATERS PA DEWITT NY 13214 DEWITT NY 13214			RKWAY			<u>-400 8243</u>				
2. Principal Place of Business 3. Mailing Address				8311 38 111 8811 68 1						
Suite, Apt. #, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES			
City & State		City	City & State				FEI Number 16-1402528	3		oplied For ot Applicable
Zip	Country	Zip	Zip Coun		try	5.	Certificate of Status Desired		8.75 Add	
6. Name and Address of Current Registered Agent			7.	7. Name and Address of New Registered Agent						
C T CORPORATION SYSTEM			Name							
	ITH PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Acceptable)					
	ON FL 33324			-	Y					
FEARITAIN	ON FE 33324									
					City			FL	Zip Cod	е
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 printed name of registered agent and title if applicable. (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 F Trust Fund Contributi	on. \Box	Added	May Be I to Fees		
10.	OFFICERS AND D	DIRECTO		11.		r	DDITIONS/CHANGES TO OF		DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCUDERI, JOSEPH R 5786 WIDEWATERS PARKWAY DEWITT NY 13214		Delete			-Nor Jeffr	ee President, Operations 🗆 Change 😡 Addition North Carolina Frey Bell 16 Widewaters Pkwy, Dewitt, NY. 13214			
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	5786 WIDEWATERS PARKWAY			F	T ADDRESS					
CITY-ST-ZIP	DEWITT NY 13214			CITY-	ST-ZIP					
TITLE	VST		☐ Delete	TITLE			***************************************	[Change	Addition
	MALONEY, CHARLES E			NAME						
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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 of instee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/03

Date

315-445-2424

Daytime Phone #

CR2E034 (10/02)