

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2003 8:00 am
Secretary of State

07-28-2003 90151 013 ***550.00

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FP

DOCUMENT # F94000006419

1. Entity Name

ORDNER CONSTRUCTION COMPANY, INC.



Principal Place of Business
**2000 NEWPORT PLACE PKWY
STE 300
LAWRENCEVILLE GA 30043**

Mailing Address
**2000 NEWPORT PLACE PKWY
STE 300
LAWRENCEVILLE GA 30043**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **58-1728368**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**CP
ORDNER, DAVID A
2000 NEWPORT PL PKWY STE 300
LAWRENCEVILLE GA 30013** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C.E.O.
DAVID ORDER** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CV
ORDNER, DONALD L
2000 NEWPORT PL PKWY STE 300
LAWRENCEVILLE GA 30043** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
DARYL DUNCAN
2000 NEWPORT PLACE PKWY # 300
LAWRENCEVILLE, GA 30043** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DST
ORDNER, LISA S
2000 NEWPORT PL PKWY STE 300
LAWRENCEVILLE GA 30043** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C.O.O.
DONALD SNYDER
2000 NEWPORT PLACE PKWY # 300
LAWRENCEVILLE, GA 30043** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C.F.O.
MARTIN ROTHMAN
2000 NEWPORT PLACE PKWY # 300
LAWRENCEVILLE, GA 30043** ☐ 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 information.

SIGNATURE:

MARTIN ROTHMAN 7/1/03 678-377-5265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)