

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G70003

1. Entity Name

OXLEY & BRANNON CONSTRUCTION CONSULTANTS, INC.

FILED
Jan 13, 2000 8:00 am
Secretary of State

01-13-2000 90024 007 ***158.75

Principal Place of Business

Mailing Address

475 CENTRAL AVE. SUITE 200
ST. PETERSBURG FL 33701

475 CENTRAL AVE. SUITE 200
ST. PETERSBURG FL 33701-3817

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2242935

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OXLEY, JOHN RICHARD
1201 MONTACELLO BLVD. NORTH
ST. PETERSBURG FL 33703

Spelling: Monticello

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
OXLEY, JOHN RICHARD
436 13TH AVE NE
ST PETERSBURG, FL 00000 33701



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
BRANNON, PATRICK W
243 79TH ST. S.
ST. PETERSBURG FL 33707



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



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TITLE
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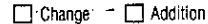
TITLE
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OXLEY, JOHN RICHARD
1201 MONTICELLO BLVD. NORTH
ST. PETERSBURG, FL 33703



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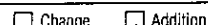
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CITY-ST-ZIP



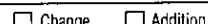
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Richard Oxley

Date

Daytime Phone #

1/07/00

727-821-9190

CR2E034 (9/99)