

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 10, 2002 8:00 am**  
**Secretary of State**

09-10-2002 90229 022 \*\*\*150.00

**DOCUMENT # P00000005042**

1. Entity Name  
**KNOWLES EXCAVATING AND CONCRETE INC.**

Principal Place of Business

**7063 GRIFFIN RD.  
 BROOKSVILLE FL 34601**

Mailing Address

**7063 GRIFFIN RD.  
 BROOKSVILLE FL 34601**

2. Principal Place of Business

**7063 Griffin Rd**  
 Suite, Apt. #, etc.

3. Mailing Address

**SAME**  
 Suite, Apt. #, etc.

City & State

**Brooksville, FL**

City & State

**FL**

4. FEI Number **59-3616373**

Applied For

Not Applicable

Zip **34601**

Country **U.S.**

Zip

Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**KNOWLES, LYNN  
 7063 GRIFFIN RD.  
 BROOKSVILLE FL 34601**

7. Name and Address of New Registered Agent

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

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 \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 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

TITLE **DPS** ☐ Delete  
 NAME **KNOWLES, LYNN**  
 STREET ADDRESS **7063 GRIFFIN RD.**  
 CITY-ST-ZIP **BROOKSVILLE FL 34601**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition  
 NAME **Jeffrey L. Knowles**  
 STREET ADDRESS **7063 Griffin Rd**  
 CITY-ST-ZIP **Brooksville, FL 34601**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

**Jeffrey L. Knowles, President**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9-5-02**

**352-544-5043**

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

a79028

# P000005042

Knowles Excavating & Concrete Inc.

7063 Griffin Rd.

Brooksville, FL 34601

Office 352-544-5043

Fax 352-796-3352

September 5, 2002

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Non-receipt of first filing notice

Dear Sir/Madam,

I have enclosed this letter regarding the notice I did not receive prior to this one, due September 13, 2002. I did not receive a notice prior to this one. I am submitting the original \$150.00 filing fee. It is my understanding that the late fee can be waived in this situation. I am the owner of this Company and can be reached at the above number if there are any questions. Thank You.

Sincerely,



Lynn E. Knowles  
President