

2002 UNIFORM BUSINESS REPORT (UBR)

4
FILED
May 01, 2002 8:00 am
Secretary of State

04-08-2002 90059 040 ***150.00

DOCUMENT # **P01000003108**

1. Entity Name
CURY & SALTMARSH CONSTRUCTION COMPANY, INC.

Principal Place of Business
1993 LARGO ROAD
JACKSONVILLE FL 32207

Mailing Address
1993 LARGO ROAD
JACKSONVILLE FL 32207



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3710637

Applied For

Not Applicable

Zip

Country

Zip

Country

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

EDWARDS, DAVID J.
200 N LAURA STREET, SUITE 1200
JACKSONVILLE FL 32202

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, 2002 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
D
 NAME
SALTMARSH, ERNEST O III Delete
 STREET ADDRESS
1993 LARGO ROAD
 CITY-ST-ZIP
JACKSONVILLE FL 32207

TITLE
President, Director Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
D
 NAME
CURY, CHRISTOPHER T Delete
 STREET ADDRESS
1020 EAST TROPICAL WAY
 CITY-ST-ZIP
PLANTATION FL 33317

TITLE
Treasurer, Director Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
D
 NAME
COOK, B. ALAN Delete
 STREET ADDRESS
2744 FIELDSTON LANE
 CITY-ST-ZIP
JACKSONVILLE FL 32207

TITLE
Secretary, Director Change Addition
 NAME
2139 Mango Place
 STREET ADDRESS
Jacksonville, Fl. 32207
 CITY-ST-ZIP

TITLE
 NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME Change Addition
 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)(f), 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: *Christopher T. Cury*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-02
 Date

904-545-3018
 Daytime Phone #

CR2E034 (9/01)