

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000084295

1. Entity Name

MEYERS SEPTICS & BACKHOE, INC.

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90058 004 ***158.75

Principal Place of Business

750 SE 150TH STREET
SUMMERFIELD FL 34491

Mailing Address

750 SE 150TH STREET
SUMMERFIELD FL 34491-3820
US

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

59-3349134

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, JANET
750 SE 150TH STREET
SUMMERFIELD FL 34491

7. Name and Address of New Registered Agent

Name

Morell J. Davis

Street Address (P.O. Box Number is Not Acceptable)

750 SE 150th St.

City

Summerfield

FL

Zip Code

34491

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

Morell J. Davis president 4/17/00
(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

TITLE	P	☐ Delete
NAME	DAVIS, MORELL D	
STREET ADDRESS	750 SE 150 ST	
CITY-ST-ZIP	SUMMERFIELD FL 34491	
TITLE	VP	☒ Delete
NAME	DAVIS, JANET	
STREET ADDRESS	750 SE 150 ST	
CITY-ST-ZIP	SUMMERFIELD FL 34491	
TITLE	T	☐ Delete
NAME	DAVIS, SHAWN	
STREET ADDRESS	750 SE 150 ST	
CITY-ST-ZIP	SUMMERFIELD FL 34491	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
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	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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)(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:

Morell J. Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00
Date

(352) 245-5763
Daytime Phone #

CR2E034 (9/99)