

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2002 8:00 am
Secretary of State

03-24-2002 90031 028 ***150.00

DOCUMENT # P99000011773
 1. Entity Name
HAMRICK, PERREY, QUINLAN & SMITH BUILDING CORPORATION

Principal Place of Business
**601 12TH ST. W.
 BRADENTON FL 34205**

Mailing Address
**601 12TH ST. W.
 BRADENTON FL 34205**



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0891993**
~~85-0648670~~
See attached documentation

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**PERREY, PHILIP E
 601 12TH ST. W.
 BRADENTON FL 34205**

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE	D	<input type="checkbox"/> Delete
NAME	HAMRICK, MICHAEL M	
STREET ADDRESS	601 12TH ST. W.	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NEWHALL, TIMOTHY L	
STREET ADDRESS	601 12TH ST. W.	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	D	<input type="checkbox"/> Delete
NAME	PERREY, PHILIP E	
STREET ADDRESS	601 12TH ST. W.	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	D	<input type="checkbox"/> Delete
NAME	QUINLAN, JOHN V	
STREET ADDRESS	601 12TH ST. W.	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMITH, GILBERT A JR.	
STREET ADDRESS	601 12TH ST. W.	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Philip E. Perrey* **President** Date: **3-5-02** Daytime Phone #: **941-747-1871**

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)

426372

Form **SS-4**
(Rev. February 1998)
Department of the Treasury
Internal Revenue Service

Application for Employer Identification Number

(For use by employers, corporations, partnerships, trusts, estates, churches, government agencies, certain individuals, and others. See instructions.)

► Keep a copy for your records.

2/8/99
~~EIN 65-0891993~~
OMB No. 1545-0003

Please type or print clearly.

1 Name of applicant (legal name) (see instructions) R.A.F. BUILDING CORPORATION	
2 Trade name of business (if different from name on line 1)	3 Executor, trustee, "care of" name
4a Mailing address (street address) (room, apt., or suite no.) POST OFFICE BOX 551	5a Business address (if different from address on lines 4a and 4b) 1401 MANATEE AVENUE WEST, SUITE 920
4b City, state, and ZIP code BRADENTON, FL 34206	5b City, state, and ZIP code BRADENTON, FL 34205
6 County and state where principal business is located MANATEE COUNTY, FLORIDA	
7 Name of principal officer, general partner, grantor, owner, or trustee — SSN or ITIN may be required (see instructions) ► PHILIP E. PERREY, PRESIDENT SSN: 262-08-0534	

8a Type of entity (Check only one box.) (see instructions)
Caution: If applicant is a limited liability company, see the instructions for line 8a.

<input type="checkbox"/> Sole proprietor (SSN)	<input type="checkbox"/> Estate (SSN of decedent)
<input type="checkbox"/> Partnership	<input type="checkbox"/> Plan administrator (SSN)
<input type="checkbox"/> REMIC	<input checked="" type="checkbox"/> Other corporation (specify) ► <u>OWN/LEASE REAL PROPERTY</u>
<input type="checkbox"/> State/local government	<input type="checkbox"/> Trust
<input type="checkbox"/> Church or church-controlled organization	<input type="checkbox"/> Federal government/military
<input type="checkbox"/> Other nonprofit organization (specify) ► _____ (enter GEN if applicable)	
<input type="checkbox"/> Other (specify) ► _____	

8b If a corporation, name the state or foreign country (if applicable) where incorporated

State FLORIDA	Foreign country
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9 Reason for applying (Check only one box.) (see instructions)

<input checked="" type="checkbox"/> Started new business (specify type) ► _____	<input type="checkbox"/> Banking purpose (specify purpose) ► _____
<input type="checkbox"/> Hired employees (Check the box and see line 12.)	<input type="checkbox"/> Changed type of organization (specify new type) ► _____
<input type="checkbox"/> Created a pension plan (specify type) ► _____	<input type="checkbox"/> Purchased going business
	<input type="checkbox"/> Created a trust (specify type) ► _____
	<input type="checkbox"/> Other (specify) ► _____

10 Date business started or acquired (month, day, year) (see instructions)
FEBRUARY 2, 1999

11 Closing month of accounting year (see instructions)
DECEMBER

12 First date wages or annuities were paid or will be paid (month, day, year). Note: If applicant is a withholding agent, enter date income will first be paid to nonresident alien. (month, day, year) ► N/A

13 Highest number of employees expected in the next 12 months. Note: If the applicant does not expect to have any employees during the period, enter -0-. (see instructions)

Nonagricultural	Agricultural	Household
0	0	0

14 Principal activity (see instructions) ► OWN AND LEASE REAL PROPERTY

15 Is the principal business activity manufacturing? Yes No
If "Yes," principal product and raw material used ► _____

16 To whom are most of the products or services sold? Please check one box. Business (wholesale) N/A

Public (retail) Other (specify) ► _____

17a Has the applicant ever applied for an employer identification number for this or any other business? Yes No
Note: If "Yes," please complete lines 17b and 17c.

17b If you checked "Yes" on line 17a, give applicant's legal name and trade name shown on prior application, if different from line 1 or 2 above.

Legal name ► _____ Trade name ► _____

17c Approximate date when and city and state where the application was filed. Enter previous employer identification number if known.

Approximate date when filed (mo., day, year)	City and state where filed	Previous EIN

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Name and title (Please type or print clearly.) ► PHILIP E. PERREY
PRESIDENT

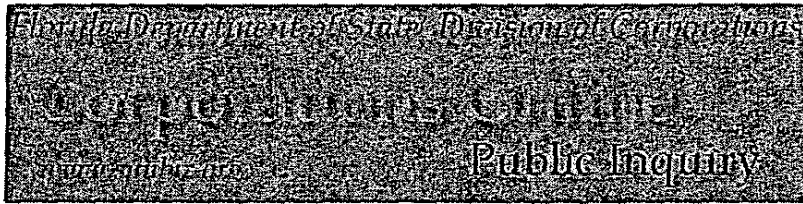
Business telephone number (include area code)
941-747-1871

Fax telephone number (include area code)
941-745-2866

Signature ► Philip E. Perrey Date ► 2/8/99

Note: Do not write below this line. For official use only.

Please leave blank ►	Geo.	Ind.	Class	Size	Reason for applying



Florida Profit

HAMRICK, PERREY, QUINLAN & SMITH BUILDING CORPORATION

PRINCIPAL ADDRESS

601 12TH ST. W.
BRADENTON FL 34205
Changed 05/16/2000

MAILING ADDRESS

601 12TH ST. W.
BRADENTON FL 34205
Changed 05/16/2000

Document Number
~~B99000011773~~

FEI Number
~~650891993~~

Date Filed
02/02/1999

State
FL

Status
ACTIVE

Effective Date
02/01/1999

Last Event
~~NAME CHANGE~~
AMENDMENT

Event Date Filed
~~06/15/1999~~

Event Effective Date
NONE

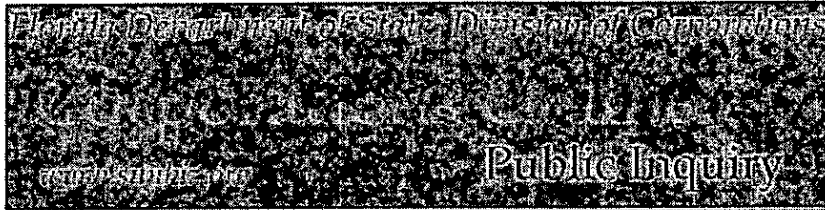
Registered Agent

Name & Address
PERREY, PHILIP E 601 12TH ST. W. BRADENTON FL 34205
Address Changed: 05/16/2000

Officer/Director Detail

Name & Address	Title
HAMRICK, MICHAEL M 601 12TH ST. W. BRADENTON FL 34205	D
NEWHALL, TIMOTHY L 601 12TH ST. W. BRADENTON FL 34205	D
PERREY, PHILIP E 601 12TH ST. W. BRADENTON FL 34205	D

426372



HAMRICK, PERREY, QUINLAN & SMITH BUILDING CORPORATION

Document Number P99000011773	Date Filed 02/02/1999	Effective Date 02/01/1999	Status Active
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EVENT TYPE	FILED DATE	EFFECTIVE DATE	DESCRIPTION
NAME CHANGE AMENDMENT	06/15/1999		OLD NAME WAS : R.A.E. BUILDING CORPORATION

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT

