

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90039 047 ***150.00

DOCUMENT # P99000024141



1. Entity Name
MODERN HOUSE & BUILDING MOVERS, INC.

Principal Place of Business
14405 CONGRESS ST
ORLANDO FL 32826

Mailing Address
1236 GALLANT FOX
CHULUOTA FL 32766



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3631206

Applied For
Not Applicable

CHECK HERE IF MAKING CHANGES

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

BURDETTE, DOUGLAS PAT
1236 GALLANT FOX
CHULUOTA FL 32766

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	BURDETTE, DOUGLAS PAT	
STREET ADDRESS	1236 GALLANT FOX	
CITY-ST-ZIP	CHULUOTA FL 32766	
TITLE	S	<input type="checkbox"/> Delete
NAME	BURDETTE, A.J.	
STREET ADDRESS	1236 GALLANT FOX	
CITY-ST-ZIP	CHULUOTA FL 32766	
TITLE	S	<input type="checkbox"/> Delete
NAME	COLLINS, CRAIG	
STREET ADDRESS	122 E 7TH ST	
CITY-ST-ZIP	CHULDOTA FL 32766	
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CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: BURDETTE AS PRESIDENT 1-6-03 407-721-3780
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)