

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000038641**

1. Entity Name

RIDDLE CONSTRUCTION COMPANY, INC.**FILED****Jan 25, 2000 8:00 am**
Secretary of State

01-25-2000 90119 027 ***158.75

Principal Place of Business

**14256 CROCUS COURT
WELLINGTON FL 33414**

Mailing Address

**14256 CROCUS COURT
WELLINGTON FL 33414-9103**

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

65-0832324Applied For
Not Applicable

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

FAIRCLOUGH, MICHAEL J**2845 N MILITARY TRAIL****SUITE 8****WEST PALM BEACH FL 33409**

Name

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

11380 PROSPERITY FARMS RD #112

City

PALM BEACH SANDS**FL**

Zip Code

33410

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

M. J. Fairclough
Signature, typed or printed name of registered agent and title if applicable.*Michael J. Fairclough*
(NOTE: Registered Agent signature required when reinstating)*01/18/00*
DATE9. 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	D	<input type="checkbox"/> Delete
NAME	RIDDLE, TODD	
STREET ADDRESS	14256 CROCUS COURT	
CITY-ST-ZIP	WELLINGTON FL 33414	

TITLE	D	<input type="checkbox"/> Delete
NAME	RIDDLE, KIRK	
STREET ADDRESS	786 CAMELLIA DRIVE	
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411	

TITLE	D	<input type="checkbox"/> Delete
NAME	RIDDLE, MARSHALL B.	
STREET ADDRESS	14256 CROCUS COURT	
CITY-ST-ZIP	WELLINGTON FL 33414	

TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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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:*Todd O. Riddle*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Todd O. Riddle 1/20/00 561-718-8