

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # 217963**

1. Entity Name

**SENKARIK BUILDING COMPANY, INC**

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90045 025 \*\*\*150.00

Principal Place of Business

Mailing Address

**104 SUNSET DRIVE  
SANFORD FL 32771  
US**

**104 SUNSET DRIVE  
SANFORD FL 32773-4743  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-6071154**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**SENKARIK, JERRY M  
2415 S ELM AVENUE  
SANFORD FL 32771**

7. Name and Address of New Registered Agent

Name

**Charles E. Senkarik**

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

**104 Sunset Drive**

City

**Sanford**

**FL**

Zip Code

**32773-4743**

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

*Charles E. Senkarik*

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

(NOTE: Registered Agent signature required when reinstating)

**APRIL 8, 2000**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
VD	SENKARIK, JERRY M.	2412 S ELM AVENUE	SANFORD FL 32771	<input checked="" type="checkbox"/>
SPD	SENKARIK, CHARLES E.	104 SUNSET DRIVE	SANFORD FL 32771	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>
Director	Ruth B. Senkarik	2412 S. Elm Avenue	Sanford, FL 32771	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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:**

*Charles E. Senkarik*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Charles E. Senkarik**

**4/8/2000**

Date

**407/322-4054**

Daytime Phone #

CR2E034 (9/99)