

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2001 8:00 am
Secretary of State
 04-13-2001 90029 033 ***158.75

DOCUMENT # P00000106862

1. Entity Name
SEVEN HILLS COMMERCIAL CONTRACTORS, INC.

Principal Place of Business

Mailing Address

**4223 TERIDAN COURT
 TALLAHASSEE FL 32303**

**4223 TERIDAN COURT
 TALLAHASSEE FL 32303**

2. Principal Place of Business

3. Mailing Address

46 Windy Court

P.O. Box 18000B

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Crawfordville, FL

Tallahassee, FL

City & State

City & State

32327

32303

Zip

Country

USA

Zip

Country

USA

4. FEI Number

59-3685485

Applied 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

**BOYETTE, ANDREA L
 4223 TERIDAN COURT
 TALLAHASSEE FL 32303**

Name: **Boyette, Andrea L.**
 Street Address (P.O. Box Number is Not Acceptable)
46 Windy Court
Crawfordville, FL
 City **FL** Zip Code **32327**

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 **Andrea L. Boyette**
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/10/01
 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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **BOYETTE, ANDREA L**
 STREET ADDRESS **4223 TERIDAN COURT**
 CITY-ST-ZIP **TALLAHASSEE FL 32303**

TITLE **President** ☒ Change ☐ Addition
 NAME **Andrea L. Boyette**
 STREET ADDRESS **46 Windy Court**
 CITY-ST-ZIP **Crawf., FL 32327**
Address only

TITLE **D** ☐ Delete
 NAME **LITTLER, JAMES S**
 STREET ADDRESS **4223 TERIDAN COURT**
 CITY-ST-ZIP **TALLAHASSEE FL 32303**

TITLE **Vice President** ☒ Change ☐ Addition
 NAME **James S. Littler**
 STREET ADDRESS **46 Windy Court**
 CITY-ST-ZIP **Crawf., FL 32327**
Address only

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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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: **Andrea L. Boyette**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01
 Date

850-524-2366
 Daytime Phone #

CR2E034 (10/00)