

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90089 013 ***150.00

DOCUMENT # P97000033624

1. Entity Name
OSHEA BUILDERS, INC.



Principal Place of Business
4574 NAUTICAL COURT
DESTIN FL 32541
US

Mailing Address
P O BOX 5709
DESTIN FL 32540
US



2. Principal Place of Business

3834 Indian Trail

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Destin, FL.

City & State

4. FEI Number 59-3283772

Applied For

Not Applicable

32541

Country USA

Zip

Country

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

6. Name and Address of Current Registered Agent

O'SHEA, PHILLIP
4574 NAUTICAL COURT
DESTIN FL 32541

7. Name and Address of New Registered Agent

Name Kelly O'Shea

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

3834 Indian Trail

City Destin

FL

Zip Code 32541

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE VP
NAME O'SHEA, PHILLIP
STREET ADDRESS 4574 NAUTICAL COURT
CITY-ST-ZIP DESTIN FL 32541 ☐ Delete

TITLE PST
NAME O'SHEA, KELLY
STREET ADDRESS 4574 NAUTICAL COURT
CITY-ST-ZIP DESTIN FL 32541 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 3834 Indian Trail
CITY-ST-ZIP Destin, FL. 32541 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 3834 Indian Trail
CITY-ST-ZIP Destin, FL. 32541 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/1/03 (850) 654-8600

CR2E034 (10/02)