## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 147763**

1. Entity Name

## STARRETT BUILDING COMPANY

Principal Place of Business		Mailing Addre	Mailing Address							
40 S ANDREWS AVENUE T. LALIDERDALE FL 33316			740 S ANDREWS AVENUE FT. LAUDERDALE FL 33316-1032				* .			
									anchi in Life	
2. Principal Place of Business		3. Mailing Add	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. 4	Suite, Apt. #, etc.		7	DO NOT WRITE IN THIS SPACE				
City & State		City & State	City & State		4. FEI Number	59-0552435	<u> </u>	<u> </u>	pplied For ot Applicable	
Zip	Country	Zip	Coun	ntry	5. Certificate of	Status Desired		\$8.75 Ad	ditional	
	6. Name and Address of (	Current Registered Ager		<del>,                                    </del>	7. Name and A	idress of New Re	gistered A	gent		
· <del></del>			·	Name	2	• •		-	~~	
BIEGELSEN, JOSEPH 740 S ANDREWS AVENUE				Street Address (P.O. Box Number is Not Acceptable)						
FORT LAUDERDALE FL 33316										
				City			FL	Zip Coo	te et	
Tax filing	Signature, typed or printed nume of registroration is eligible to satisfy its in requirement and elects to do so	tangible F	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta		10. Electi	on Campaign Fina Fund Contribution			00 May Be d to Fees	
	ria on back)			epartment of 5		ANGES TO OFFIC	TES AND	DIRECTOR	OC IN 11	
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treet address	740 S. ANDREWS AVENU	IF.		EET ADDRESS	•					
ITY-ST-ZIP	FT. LAUDEROALE FL		3	-S7-ZIP						
ne	VST		Delgie mu					☐ Change	☐ Addition	
AME	BIEGELSEN, JEFFREY P		NAM	1					<del>-</del>	
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TREET ADDRESS	740 S. ANDREWS AVENU	JE	■ <sup>-</sup>	ET ADORESS 7		<b>2</b> -	-			
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JEEL VOOGESS Preë			Delete TITU	E E ET ADORESS -ST-ZIP				☐ Change	Addition	

SIGNATURE

COLUMN TO MINISTER

JEFFREY P. BIEGELSEN
VICE PRESIDENT

STREET ADDRESS

CITY-ST-ZIP

13. It hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). 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.

APR 2 6 2000 954-463-6581

**FILED** 

Jun 23, 2000 8:00 am Secretary of State

06-23-2000 90103 005 \*\*\*150.00

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