

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90202 048 ***150.00

DOCUMENT # 279856

1. Entity Name

ROLLING HILLS BUILDERS, INC.

Principal Place of Business

Mailing Address

**2256 SMULLIAN TRAIL SOUTH
JACKSONVILLE FL 32217
US**

**4215 SOUTHPPOINT BLVD STE 100
JACKSONVILLE FL 32216-6191**

2. Principal Place of Business

3. Mailing Address

P. O. Box 551260

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Jacksonville, FL

4. FEI Number

59-1084772

Applied For

Not Applicable

Zip

Country

Zip

Country

32255

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

**GILBERT, HARTLEY M
2256 SMULLIAN TRAIL SOUTH
JACKSONVILLE FL 32217**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	GILBERT, HARTLEY M	2256 SMULLIAN TRAIL SO	JACKSONVILLE FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	GILBERT, PHYLLIS	2256 SMULLIAN TRAIL SO	JACKSONVILLE FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
T	GILBERT, HARTLEY M.	2256 SMULLIAN TRAIL SO	JACKSONVILLE FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	GILBERT, PHYLLIS	2256 SMULLIAN TRAIL SO	JACKSONVILLE FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	GILBERT, RANDALL S.	2256 SMULLIAN TRAIL SO	JACKSONVILLE FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
DAS	GILBERT, DARYL	2256 SMULLIAN TRAIL S	JACKSONVILLE FL 32217	<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 any address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-00

904-448-5149

CR2EX14 (3/98)