

**FILED**  
**Jun 25, 2003 8:00 am**  
**Secretary of State**

06-25-2003 90072 049 \*\*\*567.50

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # 324999**

1. Entity Name  
**B & M CONSTRUCTION CO., INC.**



Principal Place of Business  
**3706 DMG DRIVE  
PO BOX 5468  
LAKELAND, FL 33811-1043**

Mailing Address  
**3706 DMG DRIVE  
PO BOX 5468  
LAKELAND, FL 33811-1043**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number  
**59-1199430**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**MOORE, BOBBY L JR  
3706 DMG DRIVE  
LAKELAND, FL 33807**

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. 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 registering)

**06-23-03**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete  
NAME **MOORE, BOBBY L JR**  
STREET ADDRESS **P.O. BOX 5468**  
CITY-ST-ZIP **LAKELAND, FL 33807**

TITLE **V** ☒ Change ☐ Addition  
NAME **LEE, PHILLIP A**  
STREET ADDRESS **5407 EAGLE KAY WAY**  
CITY-ST-ZIP **COCONUT CREEK, FL 33073**

TITLE **DV** ☒ Delete  
NAME **TENER, ROBERT L**  
STREET ADDRESS **3706 DMG DRIVE**  
CITY-ST-ZIP **LAKELAND, FL 33811**

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

TITLE **VP** ☒ Delete  
NAME **SHOUPPE, DAVID W**  
STREET ADDRESS **1350 MOORE'S LANE**  
CITY-ST-ZIP **MULBERRY, FL 33860**

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

TITLE **V** ☐ Delete  
NAME **FANCHER, RONALD**  
STREET ADDRESS **6766 NELL'S WAY**  
CITY-ST-ZIP **LAKELAND, FL 33813**

TITLE **V** ☒ Change ☐ Addition  
NAME **FANCHER, RONALD**  
STREET ADDRESS **2043 EMERALD RIDGE DR**  
CITY-ST-ZIP **LAKELAND, FL 33813**

TITLE **D** ☐ Delete  
NAME **FANNING, BARBARA KAY**  
STREET ADDRESS **4491 HIDDEN PINE COURT**  
CITY-ST-ZIP **MULBERRY, FL 33860**

TITLE **D** ☒ Change ☐ Addition  
NAME **FANNING, BARBARA KAY**  
STREET ADDRESS **842 HANOVER WAY**  
CITY-ST-ZIP **LAKELAND, FL 33813**

TITLE **VP** ☐ Delete  
NAME **WILKES, WILLIAM S**  
STREET ADDRESS **2431 ELMHURST BLVD**  
CITY-ST-ZIP **KENNESAW, GA 30152**

TITLE **V** ☒ Change ☐ Addition  
NAME **WILKES, WILLIAM S**  
STREET ADDRESS **1674 VALOR RIDGE COURT**  
CITY-ST-ZIP **KENNESAW, GA 30152**

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:

*Bobby L. Moore Jr.*

**BOBBY L. MOORE, JR.**

**6-23-2003**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)