

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 22, 2000 8:00 am  
Secretary of State

02-22-2000 90016 042 \*\*\*150.00

DOCUMENT # 365475

1. Entity Name

HALFACRE CONSTRUCTION COMPANY

Principal Place of Business

Mailing Address

DESOTS ROAD  
FL 34234

PATTERSON, JOHN  
46 NORTH WASHINGTON BOULEVARD, #1  
SARASOTA FL 34236-5932  
US

2. Principal Place of Business

3. Mailing Address

7015 PROFESSIONAL PKWY E.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
SARASOTA FL

City & State

4. FEI Number 59-1297826

Applied For

Not Applicable

Zip  
34240

Country  
USA

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

Name

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

City

FL

Zip Code

PATTERSON, JOHN  
46 N WASHINGTON BLVD  
SUITE 1  
SARASOTA FL 34236

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  
DP  
COX, JOHN J.  
1701 DESOTO ROAD  
SARASOTA FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP  
7015 PROFESSIONAL PARKWAY EAST  
SARASOTA FL 34240

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP  
DST  
COX, JOHN J III  
1701 DESOTO RD  
SARASOTA FL 34234

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP  
7015 PROFESSIONAL PARKWAY EAST  
SARASOTA FL 34240

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP

☐ Delete

TITLE  
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STREET ADDRESS  
CITY- ST-ZIP

☐ Change ☐ Addition

TITLE  
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STREET ADDRESS  
CITY- ST-ZIP

☐ Delete

TITLE  
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STREET ADDRESS  
CITY- ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST-ZIP

☐ Change ☐ Addition

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.

(941) 907-9099

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
JOHN J. COX, President

Date

Daytime Phone #

2/16/2000

CR2E034 (9/99)