## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** Jan 31, 2001 8:00 am Secretary of State **DOCUMENT # 367607** 1. Entity Name ENGLAND BROTHERS CONSTRUCTION CO., INC. 01-31-2001 90034 035 \*\*\*150.00 Principal Place of Business Mailing Address 12255 - 75TH STREET, NORTH 12255 - 75TH STREET, NORTH LARGO FL 33773-3031 LARGO FLA 34643 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1301706 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ENGLAND, NORMAN E. JR. Street Address (P.O. Box Number is Not Acceptable) 12255 - 75TH STREET, NORTH LARGO FL 33773-3031 Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Addition ENGLAND, JAMES NAME NAME STREET ADDRESS 11686 GROVE STREET STREET ADDRESS CITY-ST-ZIP SEMINOLE, FL 0 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE ENGLAND, TERRY M NAME STREET ADDRESS 309 6TH AVE STREET ADDRESS C!TY-ST-ZIP INDIAN ROCKS BCH,FL0 CITY-ST-ZIP ☐ Delete TITLE Change ... ☐ Addition ENGLAND, NORMAN E. JR. NAME NAME STREET ADDRESS 2041 ASHBURY DRIVE STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL** CITY-ST-ZIP ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 an address, with all other like empowered.

Norman England 1/24/01