

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 422057

1. Entity Name
HINSON DRAGLINE & DOZIER CORPORATION

Principal Place of Business

1855 N. HAVERHILL ROAD
WEST PALM BEACH FL 33417

Mailing Address

1855 N. HAVERHILL ROAD
WEST PALM BEACH FL 33417

2. Principal Place of Business

2897 OAK DR

Suite, Apt. #, etc.

3. Mailing Address

2897 OAK DR

Suite, Apt. #, etc.

City & State

WEST PALM BEACH FLA

City & State

WEST PALM BEACH FLA

Zip

33406

Country

USA

Zip

33406

Country

USA

4. FEI Number

59-1460399

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HINSON, SAM E.
1855 NORTH HAVERHILL ROAD
WEST PALM BEACH FL 33417

7. Name and Address of New Registered Agent

Name

SAM E HINSON

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

2897 OAK DR

City

WEST PALM BEACH FL

Zip Code

33406

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 SAM E HINSON

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-24-01

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, 2001 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

TITLE P
NAME HINSON, SAM E.
STREET ADDRESS 1865 N. HAVERHILL RD.
CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete

TITLE S
NAME HINSON, GEORGIA
STREET ADDRESS 1855 N. HAVERHILL RD.
CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete

TITLE VP
NAME HINSON, GEORGIA
STREET ADDRESS 1855 N. HAVERHILL RD.
CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRES
NAME SAM E HINSON
STREET ADDRESS 2897 OAK DR
CITY-ST-ZIP WEST PALM BEACH FLA 33406 ☒ Change ☐ Addition

TITLE S
NAME GEORGIA HINSON
STREET ADDRESS 325 EXECUTIVE CENTER DR
CITY-ST-ZIP APT 214A WEST PALM BEACH FLA 33406 ☒ Change ☐ Addition

TITLE VP
NAME GEORGIA HINSON
STREET ADDRESS 325 EXECUTIVE CENTER DR
CITY-ST-ZIP APT 214A WEST PALM BEACH FLA 33406 ☒ Change ☐ Addition

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

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

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

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.

SIGNATURE: SAM E HINSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-01

Date

561-9684071

Daytime Phone #

CR2E034 (10/00)

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90068 014 ***150.00

00000001



DO NOT WRITE IN THIS SPACE