

2000 UNIFORM BUSINESS REPORT (UBR)

5/

FILED

Jul 05, 2000 8:00 am
Secretary of State

05-23-2000 90214 010 ***150.00

DOCUMENT # 492864

1. Entity Name

MASTER CONSTRUCTION, INC.

Principal Place of Business

215 OLD SANFORD OVIEDO RD
WINTER SPRINGS FL 32708
US

Mailing Address

P O BOX 196877
WINTER SPRINGS FL 32719-6877
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1655544

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

FORTNER, JIMMIE
308 E. GREENTREE LANE
LAKE MARY FL 32746

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 DV
STREET ADDRESS FORTNER, LINDA
CITY-ST-ZIP 308 E GREENTREE LANE
LAKE MARY, FL 00000 ☐ Delete

TITLE
NAME DV
STREET ADDRESS Fortner, Linda
CITY-ST-ZIP 5365 Rambling Rd.
St. Cloud, FL 34771 ☒ Change ☐ Addition

TITLE
NAME PD
STREET ADDRESS FORTNER, JIMMIE
CITY-ST-ZIP 308 E GREENTREE LANE
LAKE MARY, FL 0 ☐ Delete

TITLE
NAME PD
STREET ADDRESS Fortner, Jimmie
CITY-ST-ZIP 5365 Rambling Rd.
St. Cloud, FL 34771 ☒ Change ☐ Addition

TITLE
NAME T
STREET ADDRESS FORTNER, ROBERT "MITCH"
CITY-ST-ZIP 3712 HEATHERINGTON RD
ORLANDO FL 32808 ☐ Delete

TITLE
NAME T
STREET ADDRESS Fortner - Robert "Mitch"
CITY-ST-ZIP 11101 Tindall Rd.
Orlando, FL 32832 ☒ 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
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

615-00

Date

407 327-6444

Daytime Phone #

C-32E(04/9/99)