2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 515014 I. Entity Name NORTON CONSTRUCTION COMPANY, INC.					FILED Mar 07, 2000 8:00 an Secretary of State 03-07-2000 90055 011 ***150.00		
Principal Place of Business SCENIC HWY		Mailing Address 8682 SCENIC HWY PENSACOLA FL 32514-7907					
Principal Ph	ace of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. 1	El Number 59-1691980		Applied For Not Applicable
Zip	Country	Zip	Country	5. (Certificate of Status Desired	\$8.75 Fee Requ	Additional
	6. Name and Address of Current F	legistered Agent	Name	7. 1	Name and Address of New Registe	red Agent	
NORTON, CHARLES H., II 8682 SCENIC HWY. PENSACOLA FL 32504				(P.O. B	ox Number is Not Acceptable)		
			City				Code
The above	named entity submits this statement for	the purpose of changing its	registered office or regist	ered ag			
Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so. (a on back)	After MAY 1, 20 Make Check Payat	II FEE IS 550.00 00 Fee will be \$550.00 We to Department of St 12.	ate	10. Election Campaign Financing Trust Fund Contribution. DITIONS/CHANGES TO OFFICERS	Ad	5.00 May Be ded to Fees
REET ADDRESS	P NORTON, CHARLES H., II 8682 SCENIC HWY. PENSACOLA FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Chan	ge 🗌 Addition
le Me Ieet address	V NORTON, CHARLES H. II 8682 SCENIC HWY. PENSACOLA FL	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			Chan	ge 🗌 Addition
e Eet address	ST NORTON, CHARLES H. II 8682 SCENIC HWY. PENSACOLA FL	Delete	=TITLE NAME STREET ADDRESS CITY - ST - ZIP	=		Chan	ge Addition
e Ie Eet address '- St-Zip		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			Chan	ge 🗌 Addition
e 1e Eet address (- St-Zip		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			Chan	ge 🗌 Addition
.e Me Eet address (-st-zip		Delete	TITLE NAME STREET ADORESS YST-ZIP			Chan	ge 🔲 Addition
indicated of the corr	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo- or on an attachment with an address, w	true and accurate any that r	r the exemption stated in the signature shall have the as required by Chapter 6	Section e same 07, Flori	119.07(3)(i), Florida Statutes. I furthe legal effect as if made under oath; th da Statutes; and that my name appe	er certify that that that that I am an offi ears in Block 1	ne information cer or director 1 or Block 12 if