2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
04-24-2001 90004 017 ***150.00

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643134

DO NOT WRITE IN THIS SPACE

1. Entity Name
CONWAY CONSTRUCTION COMPANY OF PALATKA, INC.

Principal Place of Business	Mailing Address
~~907 MAIN ST~~ 1016 Main PALATKA FL 32177-3719 US	~~307 MAIN ST~~ P.O BOX 1691 PALATKA FL 32177 Palatka, FL 32178-1691 US

2. Principal Place of Business	3. Mailing Address
P.O. Box 1691	P.O. Box 1691
Suite, Apt. #, etc. 1016 Main Street	Suite, Apt. #, etc. 1016 Main Street
City & State PALATKA, FL	City & State PALATKA, FL
Zip 32178 Country PUTNAM	Zip 32178-1691 Country PUTNAM

4. FEI Number 59-1708183 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, TWILA C.
802 S. 15TH STREET
PALATKA FL 32077

7. Name and Address of New Registered Agent

Name: Elijah T. Jackson
Street Address (P.O. Box Number is Not Acceptable): 1016 Main Street
P.O. Box 1691
City: Palatka, Fl FL Zip Code 32178-1691

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: Elijah T. Jackson / Elijah T Jackson / P+D DATE: 4/13/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KNIGHT, GLENDA C 4111 BARRET PLANT CITY FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres. + D Elijah T Jackson 1016 Main St. Palatka, Fl. 32177	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD MILLER, TWILA C 802 SOUTH 15TH STREET PALATKA, FL 00000	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1st VPres, S, T, D Annie B. Jackson 1016 Main St. Palatka, Fl. 32177	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SCHMIDT, GLORIA C. 4444 NORTH 47TH ST. PHOENIX AZ	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2nd VP Melody Badie P.O. Box 262 East Palatka, Fl. 32131-0262	☑ 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

CR2E034 (10/00)

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: Elijah Jackson, P.D 4/13/01 904/325-3417
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #