2000 UNIFORM BUSINESS REPORT (UBR)

13. I hereby certify that the info indicated on this report or of the corporation or the

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surplemental report is eceiver or trustee empo

other like empowered.

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

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DOCUMENT # 560282 Apr 10, 2000 8:00 am Secretary of State 1. Entity Name BONTRAGER CONSTRUCTION, INC. 04-10-2000 90162 008 ***150.00 Mailing Address Principal Place of Business 980 CATTLEMEN RD. 980 CATTLEMEN RD. SARASOTA FL 34232 SARASOTA FL 34232-2810 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1796400 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ---**BONTRAGER, DENNIS W.** Street Address (P.O. Box Number is Not Acceptable) 8489 EAGLE PRESERVE WAY SARASOTA 34241 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD Change ☐ Addition TITLE ☐ Delete TITLE **BONTRAGER, DENNIS** NAME STREET ADDRESS STREET ADDRESS 8489 EAAGLE PRESERVE WAY CITY-ST-ZIP SARASOTA FL 34241 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE BONTRAGER, ALICE NAME 8489 EAGLE PRESERVE WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 3241 CITY-ST-ZIP vpd Change ☐ Addition ☐ Delete TITLE DOBBINS, HOWARD NAME NAME 6728 3RD ST. CT. W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34207** CITY-ST-ZIP CITY-ST-ZIP VPD ☐ Change Addition ☐ Delete TITLE TITLE STEINER, JOHN NAME NAME 4524 3RD AVE. DR. E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34208** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP mation 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 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 certifies or trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if ent with an address, with all other like empowered.

Bontrager 941-377-30/1 - 1-5-00