

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 577682

1. Entity Name

REXCO CONSTRUCTION, INC.

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90239 032 ***150.00

Principal Place of Business

Mailing Address

105 STONEBRIDGE DR
LONGWOOD FL 32779

105 STONEBRIDGE DR
LONGWOOD FL 33414-7881
US

2. Principal Place of Business

577 Squire Drive

3. Mailing Address

577 Squire Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Wellington FL

Zip
33414-7881

Country
USA

City & State
Wellington FL

Zip
33414-7881

Country
USA

4. FEI Number 59-1829066

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KIRBY, MICHELE M.
105 STONEBRIDGE DR
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name Kirby, Michele M.

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

City Wellington

FL

Zip Code 33414-7881

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.

Michele M. Kirby

(NOTE: Registered Agent signature required when reinstating)

DATE

4-25-00

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

TITLE PD ☐ Delete
NAME REX BROUGHTON KIRBY, JR.
STREET ADDRESS 105 STONEBRIDGE DR
CITY-ST-ZIP LONGWOOD FL

TITLE VPD ☐ Delete
NAME KIRBY, MICHELE M.
STREET ADDRESS 105 STONEBRIDGE DR
CITY-ST-ZIP LONGWOOD FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Change ☐ Addition
NAME REX BROUGHTON Kirby, Jr.
STREET ADDRESS 577 Squire Drive
CITY-ST-ZIP Wellington FL 33414-7881

TITLE VPD ☐ Change ☐ Addition
NAME Michele Moench Kirby
STREET ADDRESS 577 Squire Drive
CITY-ST-ZIP Wellington FL 33414-7881

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

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

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michele M. Kirby

Date

4-25-00

Daytime Phone #

501-753-2885

CR2E034 (9/99)