## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Apr 12, 2000 8:00 am Secretary of State **DOCUMENT # 606992** 1. Entity Name SIMS BROTHERS CONSTRUCTION, INC. 04-12-2000 90043 005 \*\*\*150.00 Principal Place of Business Mailing Address 3250 NAVY BLVD 3250 NAVY BLVD P O BOX 1353 P O BOX 1353 PENSACOLA FL 32596 PENSACOLA FL 32596-1353 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-1881758 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired ---Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent <u>Henry N. Sims</u> Street Address (P.O. Box Number is Not Acceptable) 3250 Navy Rouleyard SIMS, JESSE T O Navy Boulevard 3250 NAVY BLVD PENSACOLA FL 32505 Pensacolaburpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Atter MAY 1, 2000 Fee will be \$550.00 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. Change Addition ST Delete TITLE DP TITLE LEMONIS, MARY E. NAME NAME Henry N. Sims STREET ADDRESS STREET ADDRESS 3250 NAVY BLVD 3250 Navy Bouleyard CITY-ST-ZIP CITY-ST-ZIP PENSACOLA, FL 00000 Delete ☐ Change Addition TITE TITLE SIMS, JESSE THOMAS NAME STREET ADDRESS STREET ADDRESS 3250 NAVY BLVD CITY-ST-ZIP PENSACOLA, FL 00000 CITY-ST-ZIP. ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITI F ☐ Change 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-7IP CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete TITLE NAME NAME

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 ag

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: 4

STREET ADDRESS

CITY-ST-ZIP

Henry N.