

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 609704

1. Entity Name

MORNING STAR BUILDING CORPORATION

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90125 015 ***150.00

Principal Place of Business

9850 FAIRWAY CIRCLE
LEESBURG FL 34788-3648

Mailing Address

9850 FAIRWAY CIRCLE
LEESBURG FL 34788-3648

2. Principal Place of Business

123 IV MAIN ST.

Suite, Apt. #, etc.

3. Mailing Address

123 IV MAIN ST.

Suite, Apt. #, etc.

City & State

LEESBURG FL.

Zip

34748

Country

LAKE

City & State

LEESBURG FL.

Zip

34748

Country

LAKE

4. FEI Number

59-1933720

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HART, WM H JR
9850 FAIRWAY CIRCLE
LEESBURG FL 32788

7. Name and Address of New Registered Agent

Name

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

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE PD
NAME HART, WM H. J
STREET ADDRESS 9850 FAIRWAY CIRCLE
CITY-ST-ZIP LEESBURG FL LEESBURG, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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:

WM H HART JR. *WM H Hart Jr*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN. 17, 2001 352-728-2272

Date

Daytime Phone #

CR2E034 (10/00)