

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 12, 2000 08:00 AM
Secretary of State

DOCUMENT # 632065

1. Entity Name
PRAIRIE CONSTRUCTION COMPANY, INC.

Principal Place of Business
600 N COMMONWEALTH AVE
POLK CITY FL 338680129 US

Mailing Address
P.O. BOX 129
POLK CITY FL 338680129 US

2. Principal Place of Business
455 PLYMOUTH ROAD
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
AUBURNDALE FL

City & State

Zip
33823

Country
US

Zip
33823

Country
US

4. FEI Number
59-2495043

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ALBRITTON ORAIN
455 PLYMOUTH RD
AUBURNDALE FL 33823 US

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)

09/12/2000

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, 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
NAME
STREET ADDRESS
CITY-ST-ZIP

ST
GARNER, GERALD H, JR
4020 FUSSELL ROAD
POLK CITY, FL 00000

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
ALBRITTON ORAIN
455 PLYMOUTH RD
AUBURNDALE FL

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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

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☐ 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: Orain Albritton

P 09/12/2000