

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 700681

1. Entity Name

FLORIDA GOLD COAST ELECTRICAL CONTRACTORS, INC.

Principal Place of Business

3990 N.W. 9TH AVE.
FT. LAUDERDALE FL 33309

Mailing Address

246 SW 33 STREET
FT. LAUDERDALE FL 33312-5011
US

2. Principal Place of Business

2365 SW 34 Street

3. Mailing Address

2365 SW 34 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Bay # 3

Bay # 3

City & State

City & State

Ft. Lauderdale FL

Ft. Lauderdale FL

Zip

Country

33312

USA

Zip

Country

33312

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARROW, WILLIAM A.
7700 N.W. 8TH ST.
PEMBROKE PINES FL 33024

Name

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

2365 SW 34 Street

Bay 3

City

Ft. Lauderdale

FL

Zip Code

33312

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☐ Delete
NAME MILLS, DOUGLAS
STREET ADDRESS 810 S.W. 14TH ST.
CITY-ST-ZIP POMPANO BEACH FL 33060

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

D ☐ Delete
NAME SCHNEIDER, C H
STREET ADDRESS 5633 N.W. 8TH ST.
CITY-ST-ZIP MARGATE FL

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

P ☐ Delete
NAME BARROW, WILLIAM
STREET ADDRESS 7700 N.W. 8TH ST.
CITY-ST-ZIP PEMBROKE PINES FL

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

D ☐ Delete
NAME JOSEPH, JAMES
STREET ADDRESS 421 N.W. 34TH ST.
CITY-ST-ZIP OAKLAND PARK FL 33309

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

D ☐ Delete
NAME DURHAM, DEAN
STREET ADDRESS 4410 N.E. 6TH AVE.
CITY-ST-ZIP OAKLAND PARK FL 33334

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

V ☐ Delete
NAME BELYEU, DAN
STREET ADDRESS 4700 SW 64 AVENUE
CITY-ST-ZIP DAVIE FL

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 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

William A Barrow 4/25/00 (954) 316-5959

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)