

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Feb 02, 2001 8:00 am**  
**Secretary of State**

02-02-2001 90289 016 \*\*\*150.00

**DOCUMENT # 815272**

1. Entity Name

**BORAL BRICKS, INC.**

Principal Place of Business

**1630 ARTHURN RD  
AUGUSTA GA 30901  
US**

Mailing Address

**200 MANSELL COURT EAST  
SUITE 350  
ROSWELL GA 30076**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **58-0349750**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VP** ☐ Delete  
NAME **CANNON, C JR**  
STREET ADDRESS **200 MANSELL CT EAST STE 305**  
CITY-ST-ZIP **ROSWELL GA**

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

TITLE **VP** ☐ Delete  
NAME **GIBBS, L**  
STREET ADDRESS **200 MANSELL CT EAST STE 305**  
CITY-ST-ZIP **ROSWELL GA**

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

TITLE **VDAS** ☒ Delete  
NAME **JONES, STEVEN**  
STREET ADDRESS **200 MANSELL COURT EAST, STE. 310**  
CITY-ST-ZIP **ROSWELL GA 30076**

TITLE **Asst. Treasurer** ☒ Change ☒ Addition  
NAME **Pamela D. Tucker**  
STREET ADDRESS **200 Mansell Court East, Ste 310**  
CITY-ST-ZIP **Roswell, GA 30076**

TITLE **VP** ☐ Delete  
NAME **BROWN, RALPH**  
STREET ADDRESS **1630 ARTHURN RD**  
CITY-ST-ZIP **AUGUSTA GA**

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

TITLE **SVPD** ☐ Delete  
NAME **MCLEAN, ERNEST**  
STREET ADDRESS **200 MANSELL COURT EAST, STE. 310**  
CITY-ST-ZIP **ROSWELL GA 30076**

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

TITLE **PC** ☐ Delete  
NAME **BROWN, DENNIS**  
STREET ADDRESS **200 MANSELL COURT EAST, STE. 310**  
CITY-ST-ZIP **ROSWELL GA 30076**

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
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:

*Pamela Tucker* **Asst. Treasure** 1/9/01 770-552-3356  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)