

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 831995**

1. Entity Name

ROLAND PUGH CONSTRUCTION, INC.**FILED**
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90051 016 ***150.00

Principal Place of Business

Mailing Address

4400 HWY 69 NORTH
NORTHPORT AL 35473
USP.O. BOX 779
NORTHPORT AL 35476-0779
US

906635



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **63-0500152**Applied For
Not Applicable

Zip

Country

Zip

Country

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. 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.
PUGH, ANTHONY
4400 HWY 69 NORTH
NORTHPORT AL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
PUGH, ROLAND
4400 HWY 69 NORTH
NORTHPORT AL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
YESSICK, JOSEPH EDDIE I
4400 HWY 69 NORTH
NORTHPORT AL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
PUGH, GRADY
4400 HWY 69 NORTH
NORTHPORT AL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CFO
WRIGHT, DAVID R.
4400 HWY 69 NORTH
NORTHPORT AL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
YOUNG, FRED
4400 HWY 69 NORTH
NORTHPORT AL** ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR1/17/2000 205/239-4321
Date Daytime Phone #