

2000 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90100 007 ***150.00

DOCUMENT # 832723

1. Entity Name

JERVIS B. WEBB, COMPANY OF GEORGIA

Principal Place of Business

Mailing Address

WEBB INDUSTRIAL DR. NE
STA GA 30062**560 WEBB INDUSTRIAL DR. NE**
MARIETTA GA 30062-2451

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

58-0653871

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

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

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	AST	<input type="checkbox"/> Delete
NAME	WALLACE, BETTY J	
STREET ADDRESS	34375 WEST 12 MILE ROAD	
CITY-ST-ZIP	FARMINGTON HILLS MI 48331	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BEAVERS, CHARLES	
STREET ADDRESS	560 WEBB INDUSTRIAL DRIVE, N.E.	
CITY-ST-ZIP	MARIETTA GA	
TITLE	PD	<input type="checkbox"/> Delete
NAME	WEBB, GEORGE	
STREET ADDRESS	34375 W 12 MILE RD	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	VPTD	<input type="checkbox"/> Delete
NAME	HODKINSON, STEVEN F	
STREET ADDRESS	34375 W 12 MILE RD.	
CITY-ST-ZIP	FARMINGTON HILLS MI 48331	
TITLE	CD	<input type="checkbox"/> Delete
NAME	WEBB, J C	
STREET ADDRESS	34375 W 12 MILE RD	
CITY-ST-ZIP	FARMINGTON HILLS MI	
TITLE	VPGM	<input type="checkbox"/> Delete
NAME	KORACH, DAN	
STREET ADDRESS	560 WEBB INDUSTRIAL DR, NE	
CITY-ST-ZIP	MARIETTA GA 30062	

TITLE	V.P./Secr./Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Webb, Susan M	
STREET ADDRESS	34375 West 12 Mile Rd.	
CITY-ST-ZIP	Farmington Hills, MI 48331	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Dan Korach)

02-28-00

Date

(770) 426-3900

Daytime Phone #

CR2E034 (9/99)