

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90014 037 ***150.00

0603919 AT

DOCUMENT # 837597
1. Entity Name
LUCO DEVELOPMENT INCORPORATED

Principal Place of Business
COLONIAL BANK CENTRE
41 NORTH BELTLINE HIGHWAY
MOBILE AL 36608-121
US

Mailing Address
P O BOX 160306
MOBILE AL 36616

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

63-0718312

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPUS, JOSEPH J III
3298 SUMMIT BLVD #18
PENSACOLA FL 32503

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, 2002 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 **PD** ☐ Delete
NAME **SAINT, JOHN B.**
STREET ADDRESS **41 NORTH BELTLINE HIGHWAY**
CITY-ST-ZIP **MOBILE AL 36608**

TITLE **S** ☐ Delete
NAME **WESCH, PAUL C.**
STREET ADDRESS **41 NORTH BELTLINE HIGHWAY**
CITY-ST-ZIP **MOBILE AL 36608**

TITLE **T** ☒ Delete
NAME **ISHEE, WILLIAM H.**
STREET ADDRESS **41 NORTH BELTLINE HIGHWAY**
CITY-ST-ZIP **MOBILE AL 36608**

TITLE **VD** ☐ Delete
NAME **KELLY JR., DONALD P.**
STREET ADDRESS **41 NORTH BELTLINE HIGHWAY**
CITY-ST-ZIP **MOBILE AL 36608**

TITLE **VD** ☐ Delete
NAME **STEFAN, CHESTER J.**
STREET ADDRESS **41 NORTH BELTLINE HIGHWAY**
CITY-ST-ZIP **MOBILE AL 36608**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ 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 OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-02 (251)380-2929

Date

Daytime Phone #

CR2E034 (9/01)