

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 26, 2001 08:00 AM
Secretary of State

DOCUMENT # 850382

1. Entity Name
CROWDER CONSTRUCTION COMPANY

Principal Place of Business
1123 EAST TENTH STREET
CHARLOTTE NC 28230

Mailing Address
P.O. BOX 30007
CHARLOTTE NC 28230

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

56-0588260

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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
33324

FL

US

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)

04/26/2001

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 D ☐ Delete
NAME GREEK CHARLIE
STREET ADDRESS 227 W TRADE STREET, STE 1450
CITY-ST-ZIP CHARLOTTE NC 28202

TITLE D ☒ Change ☐ Addition
NAME GREER CHARLIE
STREET ADDRESS 201 SOUTH TRYON STREET, STE 1500
CITY-ST-ZIP CHARLOTTE NC 28202

TITLE V ☐ Delete
NAME TUCKER CANEY
STREET ADDRESS 10410 STONEMEDE LANE
CITY-ST-ZIP MATTHEWS NC 28105

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

TITLE S ☐ Delete
NAME FRANCIS KARL S
STREET ADDRESS 106 SOUTH FORK DRIVE
CITY-ST-ZIP BELMONT NC 28012

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

TITLE VD ☐ Delete
NAME TUCKER CANEY
STREET ADDRESS 10410 STONEMEDE LANE
CITY-ST-ZIP MATTHEWS NC 28105

TITLE D ☒ Change ☐ Addition
NAME BONSAL W RIII
STREET ADDRESS 610 MORGANTON ROAD
CITY-ST-ZIP SOUTHERN PINES NC 28387

TITLE VD ☐ Delete
NAME CROWDER W. TJR
STREET ADDRESS 3032 BACK CREEK CHURCH RD.
CITY-ST-ZIP CHARLOTTE NC 28213

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

TITLE PCD ☐ Delete
NAME CROWDER OTIS A
STREET ADDRESS 301 GREENGATE LANE
CITY-ST-ZIP CHARLOTTE NC 28211

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: KARL S. FRANCIS

SECR

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)