

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 854351

1. Entity Name

NEAREN CONSTRUCTION COMPANY, INCORPORATED

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90151 037 \*\*\*150.00

Principal Place of Business

Mailing Address

8155 WARRENTON RD  
GUNTERSVILLE AL 35976  
US

8155 WARRENTON RD  
GUNTERSVILLE AL 35066-1026  
US

2. Principal Place of Business

205 Third Avenue SE

Suite, Apt. #, etc.

3. Mailing Address

P0 Box 1026

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Cullman, Alabama

City & State

Cullman, Alabama

4. FEI Number

63-0751505

Applied For

Not Applicable

Zip

Country

35055

USA

Zip

Country

35056

USA

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 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 PD ☐ Delete  
NAME ROSS, THOMAS B.  
STREET ADDRESS 7271 WARRENTON ROAD  
CITY-ST-ZIP GUNTERSVILLE AL

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

TITLE VD ☐ Delete  
NAME ROSS, JUDY N  
STREET ADDRESS 7271 WARRENTON ROAD  
CITY-ST-ZIP GUNTERSVILLE AL

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

TITLE STD ☒ Delete  
NAME NEAREN, FRANCES W.  
STREET ADDRESS 1307 LARKWOOD DR. N.E.  
CITY-ST-ZIP CULLMAN AL

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

TITLE VD ☐ Delete  
NAME Russell Moore  
STREET ADDRESS 1103 Welts Road SE  
CITY-ST-ZIP Cullman, AL

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

TITLE STD ☐ Delete  
NAME Sharon Smith  
STREET ADDRESS 5384 County Road 1545  
CITY-ST-ZIP Cullman, AL

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 *Thomas B. Ross*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-2000 256-734-3345  
Date Daytime Phone #

CR2E034 (9/99)