## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F0000006443 - . . .

BESSEY CONSTRUCTION, INC.

Principal Place of Business 1011 E LINCOLN ST

Mailing Address

1011 E LINCOLN ST

2. Principal Place of Business	3. Mailing Address					
Suite, Apt. #, etc.	Suite, Apt. #, etc.					
City & State	City & State					

## **FILED** Jan 11, 2001 8:00 am Secretary of State 01-11-2001 90058 015 \*\*\*158.75

ST TAWAS MI 48730  Principal Place of Business  Suite, Apt. #, etc.			#9 EAST TAWAS MI 48730				6 0 0 9 3 5  DO NOT WRITE IN THIS SPACE				
			3. Mailing Address	3. Mailing Address  Suite, Apt. #, etc.							
			Suite, Apt. #, etc.								
City & State			City & State	City & State			FEI Number 38-3534431			plied For t Applicable	]
Zip	Zip Country Zip Cour			Coun	try	5. Certificate of Status Desired \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent				7.	Name and Address of New Registe	red Ag	ent		1		
	-				Name						l
BESSEY, DENNIS J 1020 ROYAL PALM DR BAREFOOT BAY FL 32976			Street Address (P.O. Box Number is Not Acceptable)								
					City			FL	Zip Code	•	1
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)		After MAY 1, 20	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees					
11.		OFFICERS A	ND DIRECTORS	12.		A	DDITIONS/CHANGES TO OFFICERS	AND [	DIRECTORS	S IN 11	_ ا
TITLE NAME STREET ADDRESS		DENNIS J NCOLN ST #9	☐ Delete	1				ĺ	Change	☐ Addition	CR2E034 (10/00)
CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST_ZIP	ST BESSEY, I 1011 E LII	JAS MI 48730 DENNIS J NCOLN ST #9 JAS MI 48730	☐ Delete	TITL NAM STRI	E			[	☐ Change	☐ Addition	CB2
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		ı				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	Addition	
TITI F	-		□ Delete	TITL	E E				Change	☐ Addition	1

STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

NAME

TITLE

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Addition

Change