

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **FD100000 1432**

1. Entity Name  
**STEEL FRAMING, INC**

FILED

02 OCT 30 PM 3:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**300008700943**  
10/30/02--01081--003 \*\*150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**2131 3RD AVE SE**  
Suite, Apt. #, etc.

3. Mailing Address  
**2131 3RD AVE SE**  
Suite, Apt. #, etc.

City & State  
**Cullman AL**  
Zip  
**35055**

City & State  
**Cullman, AL**  
Zip  
**35055**

4. FEI Number  
**72-1355065**  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent  
Name  
**DEAN GRANT**  
Street Address (P.O. Box Number is Not Acceptable)  
**1518 SW 12th AVE**  
City  
**Ocala, FL** Zip Code  
**34474**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒  
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President DARLA S. GRANT 102 Greenview Cir. Cullman, AL 35057</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary JAMES G. HILL 3415 S.E. 18th Court Ocala FL 34471</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Treasurer EVERETT L. MONTGOMERY III 102 Greenview Cir. Cullman, AL 35057</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

**hlacla J. Grant President DARLA S. GRANT 10/29/02 256-736-2210**  
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



*Steel Framing, Inc.*

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OCTOBER 29,2002

DEPT OF STATE  
DIVISION OF CORPORATIONS  
409 EAST GAINES ST.  
TALLAHASSEE, FL 32399

TO WHOM IT MAY CONCERN,

I RECEIVED A PACKET TODAY 10/29/02 LABELED NOTICE OF  
ADMINISTRATIVE DISSOLUTION OR REVOCATION.

I IMMEDIATELY CALLED 850-488-9000 IN REGARD TO THIS PACKET.  
I INFORMED THE LADY THAT I HAD NOT RECEIVED NOTICES IN REGARD  
TO THIS PACKET.

I HAVE DOWNLOADED THE FORM FROM THE INTERNET AS SHE  
INSTRUCTED ME TO DO AND I'M SENDING THE FILLED OUT FORM TO YOU  
WITH A CHECK FOR \$150.00 AS SHE INSTRUCTED.

PLEASE FEEL FREE TO CALL IF ANY ADDITIONAL INFORMATION IS  
REQUIRED.

THANK YOU.

SINCERELY YOURS,

DARLA GRANT

*"Leading the construction industry out of the woods"*

2131 3rd Avenue SE • Cullman, Alabama 35055 • Phone: (256) 736-2210 • Toll Free: 888-736-2210 • Fax: (256) 736-2214  
[www.steel framing inc.com](http://www.steel framing inc.com)