

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90206 016 ***150.00

DOCUMENT # F01000002337

1. Entity Name
PRICE-DAVIS CONSTRUCTION, INC.



Principal Place of Business
1928 SOUTH BLVD., STE 300
CHARLOTTE NC 28203

Mailing Address
1928 SOUTH BLVD., STE 300
CHARLOTTE NC 28203

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 56-1585325

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PARACORP, INC.
236 EAST 6TH AVE
TALLAHASSEE FL 32303

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and type if applicable.

Kay S. Johnston - CFO
(NOTE: Registered Agent signature required when reinstating)

4/29/03
DATE

FILE NOW!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PCTD	<input type="checkbox"/> Delete
NAME	PRICE, THOMAS L	
STREET ADDRESS	1928 SOUTH BLVD STE 300	
CITY-ST-ZIP	CHARLOTTE NC 28203	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	DAVIS IV, BURTON S	
STREET ADDRESS	1928 SOUTH BLVD STE 300	
CITY-ST-ZIP	CHARLOTTE NC 28203	
TITLE	D	<input type="checkbox"/> Delete
NAME	JOHNSTON, KAY S	
STREET ADDRESS	1928 SOUTH BLVD STE 300	
CITY-ST-ZIP	CHARLOTTE NC 28203	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEST, ROBERT E	
STREET ADDRESS	1900 CHURCH STREET, STE 100	
CITY-ST-ZIP	NASHVILLE TN 37203	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **KAY S. JOHNSTON CFO** *4/29/03* *704-342-1025*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)