

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003285

FILED  
May 01, 2002 8:00 AM  
Secretary of State

Entity Name: KEENAN, HOPKINS, SUDER & STOWELL CONTRACTORS, INC.

**Current Principal Place of Business:**

301 EAST CLARK AVENUE, SUITE 700  
LAS VEGAS, NV 89101

**New Principal Place of Business:**

**Current Mailing Address:**

301 EAST CLARK AVENUE, SUITE 700  
LAS VEGAS, NV 89101

**New Mailing Address:**

FEI Number: 58-2279196      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GORDON, BRUCE H ESQ.  
101 E. KENNEDY BLVD., SUITE 2800  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SUDER, DAVID P  
Address: 301 EAST CLARK AVENUE, SUITE 700  
City-St-Zip: LAS VEGAS, NV 89101

Title: VD ( ) Delete  
Name: MILLER, JEFFREY A  
Address: 301 EAST CLARK AVENUE, SUITE 700  
City-St-Zip: LAS VEGAS, NV 89101

Title: VD ( ) Delete  
Name: KEENAN, MARK A  
Address: 3919 RIGA BLVD.  
City-St-Zip: TAMPA, FL 33619

Title: STD ( ) Delete  
Name: STOWELL, DAVID A  
Address: 3919 RIGA BLVD.  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: MILLER, JEFFREY A  
Address: 4992 E. HUNTER AVE.  
City-St-Zip: ANAHEIM, CA 92807

Title: D ( ) Delete  
Name: CHERNE, PHILIP  
Address: 4992 E. HUNTER AVE.  
City-St-Zip: ANAHEIM, CA 92807

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A. STOWELL

STD

05/01/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date