

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90110 012 ***150.00

0608272 AT

DOCUMENT # F95000000425

1. Entity Name

PCE CONSTRUCTORS, INC.

Principal Place of Business

**11328 PENNYWOOD AVE.
 BATON ROUGE LA 70809
 US**

Mailing Address

**P.O. BOX 46417
 BATON ROUGE LA. 70895
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

72-1082832

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**C T CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 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, 2002 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 NAME ☐ Delete
PD ROBARDS, BOB N
 STREET ADDRESS **10537 RONDO AVE.**
 CITY-ST-ZIP **BATON ROUGE LA 70815**

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

TITLE NAME ☐ Delete
VD ROBARDS, MARK N
 STREET ADDRESS **6225 HICKORY RIDGE BLVD**
 CITY-ST-ZIP **BATON ROUGE LA 70817**

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

TITLE NAME ☐ Delete
STD DESSELLES, RHONDA M
 STREET ADDRESS **3821 BYRD DR.**
 CITY-ST-ZIP **BATON ROUGE LA 70814**

TITLE NAME ☒ Change ☐ Addition
Desselles, Rhonda M.
 STREET ADDRESS **12143 Coles Creek Blvd.**
 CITY-ST-ZIP **Hammond, LA 70403**

TITLE NAME ☐ Delete
VD ALLEN, MARK H
 STREET ADDRESS **37310 MANCHAC LANE**
 CITY-ST-ZIP **PRAIRIEVILLE LA 70769**

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

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 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 address, with all other like empowered.

SIGNATURE:

Rhonda M. Desselles
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OBJANDZ 225-368-0010
 Date Daytime Phone #

CR2E034 (9/01)