

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

03

FILED

03 JUN 10 AM 9:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F97000005851

1. Entity Name

Wes Morgan Construction, Inc.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

17598 Rockefeller Circle

3. Mailing Address

17598 Rockefeller Circle

Suite, Apt. #, etc.

Suite 201

Suite, Apt. #, etc.

Suite 201

DO NOT WRITE IN THIS SPACE

City & State

Fort Myers, Florida

City & State

Fort Myers, Florida

4. FEI Number

31-1265501

Applied For

Not Applicable

Zip

33912-5846

Country

Lee

Zip

33912-5846

Country

Lee

5. Certificate of Status Desired

\$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name F. Michelle Morgan

Street Address (P.O. Box Number is Not Acceptable)

17598 Rockefeller Circle, Suite 201

City Fort Myers,

FL

Zip Code 33912-5846

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

*F. Michelle Morgan*

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when reinstating)

DATE

04-25-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Morgan, Wes - President  
17598 Rockefeller Circle, Ste. 201  
Fort Myers, Florida 33912-5846

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Morgan, F. M., Vice-President  
17598 Rockefeller Circle, Ste. 201  
Fort Myers, Florida 33912-5846

TITLE NAME STREET ADDRESS CITY-ST-ZIP

700020795427  
06/12/03--01010--011 \*\*150.00

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]* (President)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/03

Date

Daytime Phone #

CR2E034B (1/2/02)

76111