

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # F97677****1. Entity Name**  
**HARTLEY BROTHERS CONSTRUCTION, INC.****Principal Place of Business****3566 NW 97TH BLVD  
GAINESVILLE FL 32606  
US****Mailing Address****ST ROAD 235N  
P O BOX 1627  
ALACHUA FL 32615****2. Principal Place of Business**

Suite, Apt. #, etc.

City &amp; State

Zip

Country

**3. Mailing Address**

Suite, Apt. #, etc.

City &amp; State

Zip

Country

**4. FEI Number 59-2315858**Applied For  
Not Applicable**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****HARTLEY, ROBERT L  
STATE ROAD 235 N  
POB 1627  
ALACHUA FL 32615**

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, 2001 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** PD ☐ Delete  
**NAME** HARTLEY, ROBERT L  
**STREET ADDRESS** ST ROAD 235 N POB 1627  
**CITY-ST-ZIP** ALACHUA, FL 00000**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** STD ☐ Delete  
**NAME** HARTLEY, PHILLIP W  
**STREET ADDRESS** 315 SW 218TH  
**CITY-ST-ZIP** NEWBERRY FL**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** V ☒ Delete  
**NAME** COWART, DEWAYNE  
**STREET ADDRESS** 19221 NE 132ND AVE  
**CITY-ST-ZIP** WALDO FL 32694-4428**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** V ☐ Delete  
**NAME** HARTLEY, STEPHEN  
**STREET ADDRESS** 4000 SW 51ST ST  
**CITY-ST-ZIP** GAINESVILLE FL 32606**TITLE** ☒ Change ☐ Addition  
**NAME** HARTLEY, STEPHEN  
**STREET ADDRESS** 15829 NW 32nd Ave  
**CITY-ST-ZIP** NEWBERRY, FL 32669**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP****TITLE** ☐ Change ☐ Addition  
**NAME**  
**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 attachment with an address with all other information.****SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/23/01



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)