## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # G18761**

ASSOCIATED BUILDING SERVICES, INC.

Principal Place of Business

Mailing Address

2125 N. COMMERCE PKWY

CITY-ST-ZIP

WESTON FL 33326

2125 N. COMMERCE PKWY WESTON FL 33326-3238

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2. Principal Place of Business		3. Mailing Address		)		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 59-2249119 Applied For Not Applied be		
Zìp	Country	Zip	Country	5. Certificate of Status Desired		
. ———	6. Name and Address of Current	Registered Agent ~ 32		7. Name and Address of New Registered Agent		
			Name			
DICKINSON, WALTER C. 2125 N. COMMERCE PKWY WESTON FL 33326			Street Addres	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	s registered office or regis	istered agent, or both, in the State of Florida.		
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NO	TE: Registered Agent signature requ	quired 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 After MAY 1, 2	!!! FEE IS \$150.00 000 Fee will be \$550.00 ble to Department of S	i inisi fund Continuation. 🗀 Added to rees		
11.	OFFICERS AND	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DICKINSON, WALTER C. 2125 N. COMMERCE PKWY WESTON FL 33326	☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKINSON, WALTER 2125 N. COMMERCE PKWY WESTON FL 33326	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT DICKINSON, JANICE C 2125 N. COMMERCE PKWY WESTON FL 33326	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNCAN, JOHN C JR. 2125 N. COMMERCE PKWY WESTON FL 33326	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME		☐ Delete	TITLE NAME CTREET ADDRESS	☐ Change ☐ Addition		

13. I hereby certify that the information supplied with this filling 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 by 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 angle ess, with all other like empowered.

CITY-ST-ZIP

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 21, 2000 8:00 am Secretary of State

04-21-2000 90036 019 \*\*\*150.00