## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 21, 2000 8:00 am Secretary of State **DOCUMENT # G40348** 1. Entity Name DELCO CONSTRUCTION, INC. 03-21-2000 90024 040 \*\*\*150.00 Mailing Address Principal Place of Business P.O. ROX 352118 P.O. BOX 352118 PALM COAST FL 32135-2118 PALM COAST FL 32135 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2315684 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPOTTS, ROBERT Street Address (P.O. Box Number is Not Acceptable) 2990 OCEAN SHORE BLYD P.O.BOX 169 DAYTONA BEACH, FL. OFFMOND: BEARH FLX327/14 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Change ☐ Addition F0'14 '1/'F1 ☐ Delete TITLE KING JUDITH A NAME NAME STREET ADDRESS STREET ADDRESS PO BOX 350108, 28 COCONUT CT CITY-ST-ZIP CITY-ST-ZIP PALM COAST FL 32135 Change ☐ Addition ☐ Delete TITLE TITLE SPOTTS, MAUREEN NAME SPOTTS, P.O.BOX MAUREEN 2900 OCEAN SHORE BLVD #101 STREET ADDRESS STREET ADDRESS 32115 CITY-ST-ZIP ORMOND BEACH FL CITY-ST-7IP BEACH, FL. DAYTONA Change ☐ Addition ☐ Delete TITLE SPOTTS, ROBERT NAME SPOTTS, ROBERT P.O.BOX 169 NAME STREET ADDRESS STREET ADDRESS 2900 OCEAN SHORE BLVD #101 CITY-ST-ZIP ORMOND BEACH FL 32714 CITY-ST-ZIP DAYTONA BEACH, FL. 32115 Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 than the proposed of the corporation of the receiver or trustee empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

3/17/00 904-437-0638

Change

☐ Addition