

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90567 023 ***150.00

DOCUMENT # G54409

1. Entity Name

BILL BERRY CONSTRUCTION CORP.

Principal Place of Business

3903 BAMBOO TERRACE
BRADENTON FL 34210
US

Mailing Address

3903 BAMBOO TERRACE
BRADENTON FL 34210
US

2. Principal Place of Business

915 - 29th Ave. W.

3. Mailing Address

915 - 29th Ave. W.

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

Bradenton, FL

City & State

Bradenton, FL

4. FEI Number

59-2887827

Applied For

Not Applicable

Zip

34205

Country

Manatee

Zip

34205

Country

Manatee

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERRY, RAYMOND C.
3903 BAMBOO TERRACE
BRADENTON FL 34210

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 **PST** ☐ Delete
NAME **BERRY, RAYMOND C**
STREET ADDRESS **3903 BAMBOO TERRACE**
CITY-ST-ZIP **BRADENTON FL**

TITLE **Vice-President & Director** ☐ Change ☒ Addition
NAME **Bruce E. Pope**
STREET ADDRESS **915 - 29th Ave. W.**
CITY-ST-ZIP **Bradenton, FL 34205**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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 like empowered.

SIGNATURE: R.C. BERRY **R.C. BERRY PST**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/01

Date

941-746-0224

Daytime Phone #

CR2E034 (10/00)