

2002 UNIFORM BUSINESS REPORT (UBR)

05-19-2002 90049 032 ***150.00
 FILED G57294

02 JUN 24 PM 2:03

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **G57294**

1. Entity Name
DANIEL HOOPER CONSTRUCTION, INC.

Principal Place of Business
**114 NORTHMOOR ROAD
 CASSELBERRY FL 32707-3804**

Mailing Address
**114 NORTHMOOR ROAD
 CASSELBERRY FL 32707-3804**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2324757**

Applied For
 Not Applicable

Zip Country

Zip Country

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

**HOOPER, DANIEL B
 114 NORTHMOOR ROAD
 CASSELBERRY FL 32707**

Name
 Street Address (P.O. Box Number is Not Allowed)
 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, 2002 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 Delete
 NAME **PD HOOPER, DANIEL B**
 STREET ADDRESS **114 NORTHMOOR ROAD**
 CITY-ST-ZIP **CASSELBERRY FL 32707**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **SD HOOPER, REBECCA**
 STREET ADDRESS **114 NORTHMOOR ROAD**
 CITY-ST-ZIP **CASSELBERRY FL 32707**

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

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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: **DANIEL HOOPER** **REQUIRED**

4/19/02 402-831-1930

CR2E034 (9/01)