

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90122 046 ***150.00

DOCUMENT # G64253

1. Entity Name

J. DANIEL HOWARD CONSTRUCTION CO., INC.

Principal Place of Business

**1246 TALL PINE TRAIL
 GULF BREEZE FL 32561
 US**

Mailing Address

**1246 TALL PINE TRAIL
 GULF BREEZE FL 32561
 US**

2. Principal Place of Business

3. Mailing Address

P. O. Box 208

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**City & State
 Gulf Breeze, Florida**

Zip

Country

**Zip
 32561**

**Country
 USA**

4. FEI Number

59-2350924

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

**DAVIS, ROLLIN D. JR.
 226 S PALAFOX ST.
 PENSACOLA FL 32501**

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, 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 **PD** ☐ Delete
 NAME **HOWARD, J. DANIEL**
 STREET ADDRESS **1246 TALL PINE TRAIL**
 CITY-ST-ZIP **GULF BREEZE FL 32561**

TITLE ☒ Change ☐ Addition
 NAME **P.O. Box 208**
 STREET ADDRESS **Gulf Breeze, FL 32561**
 CITY-ST-ZIP

TITLE **ST** ☐ Delete
 NAME **HOWARD, J. DANIEL**
 STREET ADDRESS **1246 TALL PINE TRAIL**
 CITY-ST-ZIP **GULF BREEZE FL 32561**

TITLE ☒ Change ☐ Addition
 NAME **P.O. Box 208**
 STREET ADDRESS **Gulf Breeze, FL 32561**
 CITY-ST-ZIP

TITLE ☐ Delete
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 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 HOWARD
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 15, 2002 850-932-3601

Date

Daytime Phone #

CR2E034 (9/01)