

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G82631

FILED  
Jan 10, 2002 8:00 AM  
Secretary of State

Entity Name: CARLSON FENCE COMPANY, INC.

**Current Principal Place of Business:**

8491 NW 64TH STREET  
MIAMI, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

8491 NW 64TH STREET  
MIAMI, FL 33166 US

**New Mailing Address:**

FEI Number: 59-2492999      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, MARK  
11120 MINNEAPOLIS DRIVE  
COOPER CITY, FL 33026 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DAVIS, MARK,  
Address: 11120 MINNEAPOLIS DR  
City-St-Zip: COOPER CITY, FL

Title: VPS ( ) Delete  
Name: DAVIS, RONALD  
Address: 6380 MIAMI LAKEWAY S  
City-St-Zip: MIAMI LAKES, FL 33014

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK E DAVIS

PD

01/10/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date