

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90531 023 ***158.75

DOCUMENT # H21528

1. Entity Name
CARDINAL CONTRACTORS, INC.



Principal Place of Business

~~943 S BENEVOLO~~
~~STE 201~~
~~SARASOTA FL 34232~~

Mailing Address

~~943 S BENEVOLO~~
~~STE 201~~
~~SARASOTA FL 34232~~

2. Principal Place of Business
2201 Cantu Court

3. Mailing Address
Same

Suite, Apt. #, etc.
Suite 202

Suite, Apt. #, etc.

City & State
Sarasota, FL

City & State

4. FEI Number
59-2446479

Applied For
Not Applicable

Zip Country
34232 Sarasota

Zip Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

~~PICKLE, KEITH~~
~~943 S BENEVOLO~~
~~STE 201~~
~~SARASOTA FL 34232~~

7. Name and Address of New Registered Agent

Name
William J. McDevitt
Street Address (P.O. Box Number is Not Acceptable)
2201 Cantu Court
City **Sarasota** FL Zip Code **34232**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *William J. McDevitt*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/6/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Director** ☒ Delete
NAME **PICKLE, KEITH A.**
STREET ADDRESS **1740 ALDERMAN ST #9**
CITY-ST-ZIP **SARASOTA FL**

TITLE **Director/Secretary** ☒ Change ☐ Addition
NAME **Pickle, Keith A.**
STREET ADDRESS **1939 Lincoln Drive**
CITY-ST-ZIP **Sarasota, FL 34236**

TITLE **Director/President** ☒ Delete
NAME **MCDEVITT, WILLIAM J.**
STREET ADDRESS **7508 WEEPING WILLOW DR**
CITY-ST-ZIP **SARASOTA FL**

TITLE **Director/President** ☒ Change ☐ Addition
NAME **William J. McDevitt**
STREET ADDRESS **2201 Cantu Court**
CITY-ST-ZIP **Sarasota, FL 34232**

TITLE **Treasurer/Asst. Secretary** ☐ Delete
NAME **Gary Goree**
STREET ADDRESS **5707 Monte Rosso Road**
CITY-ST-ZIP **Sarasota, FL 33243**

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

TITLE **Vice President** ☐ Delete
NAME **Donald T. Mullaney**
STREET ADDRESS **1880 Chimney Creek Place**
CITY-ST-ZIP **Sarasota, FL 34235**

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

TITLE **Vice President** ☐ Delete
NAME **William Moore**
STREET ADDRESS **349 6th Avenue North**
CITY-ST-ZIP **Terre Verde, FL 33715**

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

TITLE **Vice President** ☐ Delete
NAME **William Petersen**
STREET ADDRESS **5111 Highbury Circle**
CITY-ST-ZIP **Sarasota, FL 34238**

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *GARY GOREE* **GARY GOREE, TREASURER** *1/6/03 (941) 377-8555*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)