2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H24451



FILED Jan 21, 2003 8:00 am Secretary of State 01-21-2003 90038 040 ***158.75

VALLENCOURT CONSTRUCTION CO., INC.								01	21 2003		10 130	.,,
Principal Place 1532 KINGSLE STE 107 ORANGE PARK US 2. Principal Pl	Y AVE 3 FL 32073 ace of Business Blanding Blvd.	1532 KII STE 107 ORANGI US 3. Mailin	Address NGSLEY AVE PARK FL 32073 g Address O BOX Apt. #, etc.	65	849						9000	
City & State	leburg, FL		state ange f	Park	< , F	1	4. FE	El Number	-246905		A	pplied For ot Applicable
3206	8 Country' - U.S.A.	<u> </u>	32065	Countr	<u>U.S.</u>	A.		ertificate of Stat			\$8.75 Ad Fee Require	ditional ed
1916 GULF JACKSON 8. The above	6. Name and Address of Current F F, JAMES A. F LIFE TOWER ALLE FL 32207 named entity submits this statement for ons of registered agent.			egistered	City	Ja	50. Bo	Ame and Address Ne He X Number is No R IVER Plant SON VI nt, or both, in the	Ja Acceptab ace I	Mes Blvd.	A. Ste	207
Fi After Make Check	Signature, typed or printed name of registered agent and LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State			Agent signatu	re required		9. Election (Trust Fun	d Contributi	on.	\$5.0 Added	00 May Be
NAME STREET ADDRESS	PD VALLENCOURT, MICHAEL A. 598 GLASGOW CT. ORANGE PARK FL	DIRECTORS	Delete	11. TITLE NAME STREET CITY-S	TADDRESS ST-ZIP		ADD	OITIONS/CHAN	GES TO OF	FICERS AN	ND DIRECTOR Change	S IN 11 Addition
NAME STREET ADDRESS	VD VALLENCOURT, FRANCIS E. 144 BLAKE AVENUE ORANGE PARK FL	·	□ Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP		_				☐ Change	☐ Addition
NAME STREET ADDRESS	STD Vallencourt, Kathryn J. 598 Glasgow Ct. Orange Park Fl		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· ·		□ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP				*5.	` .	☐ Change	☐ Addition
TITLE NAME STREET AODRESS CITY-ST-ZIP	•		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP					*,	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with the property of supplemental for the supplied with the property of supplemental for the suppl	hio filina da	Delete	CITY-S		od in Sec	tion 1	10 07/3\/i\ F(==i	do Stotutos	I fugilizar	☐ Change	Addition

port 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 by mpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if ess, with all other like empowered. of the corporation or the receiver changed, or on an attachment

SIGNATURE:

MATURE RIMICHAELFAEVALLENCOURT, PRES. IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR