

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90121 015 ***158.75

DOCUMENT # H91477

1. Entity Name
DRYMON REFRIGERATION AND CONSTRUCTION, INC.



Principal Place of Business
6003 31ST STR E
BRADENTON FL 34203
US

Mailing Address
6003 31ST STR E
BRADENTON FL 34203
US

90013086



2. Principal Place of Business
3014 59 Ave. Dr. E.
Suite, Apt. #, etc.

3. Mailing Address
3014 59 Ave. Dr. E.
Suite, Apt. #, etc.

☒ **CHECK HERE IF MAKING CHANGES**

City & State
Bradenton, FL
Zip
34203
Country
Manatee USA

City & State
Bradenton, FL
Zip
34203
Country
Manatee USA

4. FEI Number **59-2639755**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DRYMON, WILLIAM E
6003 31ST STR E
BRADENTON FL 34203

7. Name and Address of New Registered Agent

Name **William E. Drymon**
Street Address (P.O. Box Number is Not Acceptable)
3014 59 Ave. Dr. E
City **Bradenton** **FL** **Zip Code** **34203**

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 *[Signature]* **DATE** **1/28/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	D	<input type="checkbox"/> Delete
NAME	DRYMON, A. H., JR.	
STREET ADDRESS	6003 31ST ST EAST	
CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	TSDP	<input type="checkbox"/> Delete
NAME	DRYMON, WILLIAM E.	
STREET ADDRESS	3150 47TH ST	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	DRYMON, TIMOTHY S	
STREET ADDRESS	1221 SUMMER MEADOW DR	
CITY-ST-ZIP	BRADENTON FL 34202	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)