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2001 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

Apr 09, 2001 8:00 am Secretary of State DOCUMENT # J12186 SLATER & SONS GENERAL CONTRACTORS, INC. 04-09-2001 90027 008 ***150.00 Principal Place of Business Mailing Address 2212 NORTH WEST 14TH WAY 2212 NORTH WEST 14TH WAY BOYNTON BEACH FL 33436 **BOYNTON BEACH FL 33436** UŞ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2697791 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SLATER, RICHARD A. Street Address (P.O. Box Number is Not Acceptable) 121 SANTIAGO STREET ROYAL PLM BCH. FL 33411 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition Delete TITLE TITI F NAME NAME SLATER, MERRIE A. STREET ADDRESS STREET ADDRESS 121 SANTIAGO STREET CITY-ST-ZIP CITY-ST-ZIP <u>Royal Palm Beach Fl</u> ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME SLATER, RICHARD A. SR. STREET ADDRESS STREET ADDRESS 121 SANTIAGO STREET CITY-ST-7IP CITY-ST-ZIP ROYAL PALM BEACH FL TITLE ☐ Change ☐ Addition Delete TITLE DVP NAME NAME SLATER, RICHARD A. JR. STREET ADDRESS STREET ADDRESS 22864 OVERSEAS HIGHWAY CITY-ST-ZIP CiTY-ST-7IP CUDJOE KEY FL Addition ☐ Change ☐ Delete TITI F TITLE NAME NAME SLATER, ROBERT C. STREET ADDRESS STREET ADDRESS 2212 NORTH WEST 14TH WAY CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL** ☐ Addition Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 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