## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT#** J50303

1. Entity Name

RANDAL	L CONSTRUCTION OF I	PENSACOLA, INC.				08-27-2002 90116	013 ***55	0.00	
Principal Pla 1045 S FAIR PENSACOLA			Mailing Address 1045 S FAIRFIELD PENSACOLA FL 32506						
2. Principal	Place of Business	3. Mailing Addres	s		_				
Suite, Apt	#, etc.	Suite, Apt. #, et	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Sta	te	City & State	City & State			FEI Number 59-2756081 Applied For			
Zip Country		Zip	Zip Countr		5. Certificate of Status Desired S8.75 Additional Fee Required				
<del></del>	6. Name and Address of Cu	J			7. Name and Address of New Registered Agent				
	The state of the s	riegiololeu Ageill		Name		name and Address of New Registered	Agent		
RANDALL, HENRY E. 900 PARADISE BCH.CRCL.				Street Address (P.O. Box Number is Not Acceptable)					
	DLA FL 32506				,				
			City		FI	Zip Cod	le		
8. The above the obliga SIGNATURE	tions of registered agent.	agent and title if applicable.		ed office or regi			n familiar with, 子/z ヱ/o		
Tax filing requirement and elects to do so.  After September				!!! FEE IS \$550.00 3, 2002 Fee will be \$750.0 ble to Department of Stat		Election Campaign Financing     Trust Fund Contribution.		0 May Be	
11.	OFFICERS	AND DIRECTORS	12.		AD	DDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RANDALL, HENRY E. 900 PARADISE BCH.CRCL. PENSACOLA FL	☐ Dele	NAME STRE		,		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Delete RANDALL, HENRY W. 3300 GRAUPERA AVE. PENSACOLA FL		NAME STREE		☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delet	NAME STREE				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delet	NAME STREE				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delet	, NAME STREE				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP		☐ Delet	NAME	T ADDRESS	***		☐ Change	Addition	

13. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

850 453 0036

Aug 27, 2002 8:00 am Secretary of State