## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 13, 2002 8:00 am Secretary of State **DOCUMENT #** K26745 1. Entity Name 05-13-2002 90114 014 \*\*\*150.00 JAYDEN CONSTRUCTION COMPANY OF FLORIDA, INC. Principal Place of Business Mailing Address 337 E INDIANTOWN RD 337 E INDIANTOWN RD SUITE 8 SUITE 8 JUPITER FL 33477 JUPITER FL 33477 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 65-0055261 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DENHOLTZ, STEWART F Street Address (P.O. Box Number is Not Acceptable) 337 E INDIAN TOWN RD SUITE 8 JUPITER FL 33477 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME DENHOLTZ, JACK W. NAME STREET ADDRESS 337 E INDIANTOWN ROAD, SUITE 8 STREET ADDRESS CITY-ST-ZIP Jupiter FL 33477 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Change NAME DENHOLTZ, STEWART NAME STREET ADDRESS 337 E INDIANTOWN ROAD, SUITE 8 STREET ADDRESS CITY-ST-7IP JUPITER FL 33477 CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME MCNAMARA, COLLEEN J NAME STREET ADDRESS 337 E INDIANTOWN ROAD, SUITE 8 STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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 changed, or on an attachment with an address, with all other like empowered.

FILED

CR2E034 (9/01)