

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K55664

1. Entity Name

BIGGS & SON, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90036 031 ***158.75

Principal Place of Business

Mailing Address

8580 PALMOFISH CAMP RD
LOT H
ST AUGUSTINE FL 32092
US

8580 PALMOFISH CAMP RD
LOT H
ST AUGUSTINE FL 32092-2254
US

2. Principal Place of Business

5245 Datil Pepper Rd.
Suite, Apt. #, etc.

3. Mailing Address

5245 Datil Pepper Rd.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

St. Augustine, FL

City & State

St. Aug. FL

4. FEI Number

59-2920494

Applied For

Not Applicable

Zip

32086

Country

U.S.A.

Zip

32086

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BIGGS, MARK
8580 PALMOFISH CAMP ROAD
LOT H
ST AUGUSTINE FL 32092

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Mark E. Biggs / owner

2-17-00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
BIGGS, MARK
8580 PALMOFISH CAMP ROAD, LOT H
ST AUGUSTINE FL 32092 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE:

Mark E. Biggs / Mark E. Biggs

2-17-00

904-806-2973

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)