

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # K94488**

1. Entity Name

BRADDOCK CONSTRUCTION, INC.**FILED**
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90130 029 ***150.00

Principal Place of Business

Mailing Address

1147 1ST AVE. S.
P O BOX 51328
JACKSONVILLE BEACH FL 32250
US1147 1ST AVE. S.
P O BOX 51328
JACKSONVILLE BEACH FL 32250
US

2. Principal Place of Business

1147 1st Avenue South

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 51328

Suite, Apt. #, etc.

City & State

Jacksonville Beach, FL

City & State

Jacksonville Beach, FL

4. FEI Number

59-2947037

Applied For

Not Applicable

Zip

32250

Country

USA

Zip

32250

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

BRADDOCK, JOHN, D
1147 1ST AVE. S.
JACKSONVILLE BEACH FL 32250

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

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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 PD
NAME BRADDOCK, JOHN
STREET ADDRESS 121 32 AVE S
CITY-ST-ZIP JACKSONVILLE BCH FL ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE T
NAME MIER, CHARLES
STREET ADDRESS 34 SEA PARK DR
CITY-ST-ZIP ST AUGUSTINE FL ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE S
NAME GRINNAN, KIM E
STREET ADDRESS 2 BOMITA DR
CITY-ST-ZIP PONTE VEDRA BEACH FL ☒ DeleteTITLE Secretary
NAME Braddock, Thomas M.
STREET ADDRESS 607 N. 3rd Avenue
CITY-ST-ZIP Jacksonville Beach, FL 32250 ☒ Change ☐ AdditionTITLE V
NAME HICKS, FRANKLIN O.
STREET ADDRESS 1292 18TH ST. N.
CITY-ST-ZIP JACKSONVILLE BCH FL ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE V
NAME PINOVER, BRAD
STREET ADDRESS 3839 LUTH DRIVE, EAST
CITY-ST-ZIP JACKSONVILLE BCH FL ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE V
NAME BRADDOCK, THOMAS M.
STREET ADDRESS 607 N. 3RD AVE.
CITY-ST-ZIP JACKSONVILLE BCH. FL ☒ DeleteTITLE
NAME ☐ Change ☐ Addition
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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/15/01 (904)247-2302

CR2E034 (10/00)