

2002 UNIFORM BUSINESS REPORT (UBR)

10/2
K94488
AV

DOCUMENT # **K94488**

1. Entity Name

BRADDOCK CONSTRUCTION, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 DEC -9 AM 8:01

Principal Place of Business

1147 1ST AVE. S.
JACKSONVILLE BEACH FL 32250
US

Mailing Address

P O BOX 51328
JACKSONVILLE BEACH FL 32250
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2947037

Applied For

Not Applicable

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, 2002 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	PD BRADDOCK, JOHN 121 32 AVE S JACKSONVILLE BCH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MIER, CHARLES 34 SEA PARK DR ST AUGUSTINE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HICKS, FRANKLIN O. 1292 18TH ST. N. JACKSONVILLE BCH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PINOVER, BRAD 3839 LUTH DRIVE, EAST JACKSONVILLE BCH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRADDOCK, THOMAS M. 607 N. 3RD AVE. JACKSONVILLE BEACH FL 32250	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition (Add Zip code) 32250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition (Add Zip code) 32080
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition (Add Zip code) 32250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1324 Night Hawk Court Jacksonville, FL 32224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300003440893 12/10/02--01079--016 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-16-02 (904) 247-2302

CR2E034 (9/01)



Braddock Construction, Inc.

P.O. BOX 51328, JACKSONVILLE BEACH, FLORIDA 32250

December 5, 2002

Mr. Andy Dunlap, Reinstatement Division
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Andy:

In response to Pat Bailey's letter dated December 2, 2002, please reinstate our corporation immediately. As I explained in our phone conversation today, we filed our Uniform Business Report #K94488 and paid using your electronic filing system on March 22, 2002. On April 18, 2002, I received a letter indicating that payment had not been received. I spoke with Cathy in your office and was told that the third party contractor had never processed the EFT payments. On April 18, 2002, I sent you our check number 19172 since the EFT payment had not cleared our bank. Apparently, this check was lost in transit.

I am now enclosing a replacement check #20583, along with a copy of our original UBR 2002 filing, and copies of all the above-referenced documentation. I trust this will adequately resolve this matter, but if you have questions or need further information please call me at (904) 247-2302.

Sincerely,

Susan S. Veal
Controller

enclosures