

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 02, 2001 8:00 am**  
**Secretary of State**

06-02-2001 90009 004 \*\*\*550.00

**DOCUMENT # K97171**

1. Entity Name  
**WILBRO JOINT VENTURES, INC.**

Principal Place of Business

**1200 GARVEY RD S.W.  
 PALM BAY FL 32908**

Mailing Address

**1200 GARVEY RD S.W.  
 PALM BAY FL 32908**

2. Principal Place of Business

**1200 Garvey Rd. S.W.  
 Suite, Apt. #, etc.**

3. Mailing Address

**1400 Garvey Rd. S.W.  
 Suite, Apt. #, etc.**

City & State

**Palm Bay, Fla.**

City & State

**Palm Bay, Fla.**

Zip

**32908**

Country

**Brevard**

Zip

**32908**

Country

**Brevard**

4. FEI Number

**59-2957243**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WILLIAMS, ELIZABETH C  
 1200 GARVEY ROAD, S.W.  
 PALM BAY FL 32908**

7. Name and Address of New Registered Agent

Name **Williams, Paul**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1400 Garvey Rd. S.W.**  
 City **Palm Bay, Fla.** **FL** Zip Code **32908**

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

(NOT Registered Agent's signature required when reinstating)

**May 29, 2001**  
 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 State**

10. Election Campaign Financing Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	WILLIAMS, PAUL D	
STREET ADDRESS	1400 GARVEY ROAD, SW	
CITY-ST-ZIP	PALM BAY FL 32908	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WILLIAMS, DANIEL L	
STREET ADDRESS	1300 GARVEY RD S.W.	
CITY-ST-ZIP	PALM BAY FL 32908	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	WILLIAMS, ELIZABETH C	
STREET ADDRESS	1200 GARVEY RD S.W.	
CITY-ST-ZIP	PALM BAY FL 32908	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Williams, Elizabeth C.	
STREET ADDRESS	1400 Garvey Rd. S.W.	
CITY-ST-ZIP	Palm Bay, Fla 32908	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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, and that the information indicated on this report or supplemental report is true and accurate and that of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered

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 of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered

SIGNATURE: **Paul Williams**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**May 29, 2001 (321) 727-7092**  
 Date Daytime Phone #

CR2E034 (10/00)