## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L01683

1. Entity Name

CALHOUN CONSTRUCTION COMPANY

Principal Place of Business Mailing Address 310 DILLARD STREET., SUITE 200 P.O. BOX 770159 WINTER GARDEN FL 34787 WINTER GARDEN FL 34777-0159 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 65-0143403 Not Applicable Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAEHOUN; WAYMOND H: JR \_\_\_\_ "Street Address (P.O. Box Number is Not Acceptable) — 13102 SHORE DRIVE WINTER GARDEN FL 34787 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. I am familiar with, and accept 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 FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete Addition ☐ Change NAME CALHOUN, TILDA DUKE NAME STREET ADDRESS 13102 SHORE DRIVE STREET ADDRESS CITY-ST-7IP WINTER GARDEN FL 34787 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME CALHOUN, WAYMOND NAME STREET ADDRESS 13102 SHORE DRIVE STREET ADDRESS CITY-ST-ZIP WINTER GARDEN FL 34787 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change \_\_\_ Addition NAME CALHOUN, WAYMOND H J NAME STREET ADDRESS 13102 SHORE DRIVE STREET ADDRESS CITY-ST-ZIP WINTER GARDEN FL 34787 CITY-ST-ZIP TITLE ☐ Delete ☐ Change — ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITI F Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE** 

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-3-02

407-654 7532

Daytime Phone :

FILED

Jul 09, 2002 8:00 am Secretary of State

07-09-2002 90021 026 \*\*\*150.00

CR2E034 (4/02)

Allachmento # LO1683 119825

Calhoun Construction Company P.O. Box 770159 Winter Garden, FL 34777-0159

7.7

July 3, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Document #L01683

Dear Sirs:

Due to the fact that we are changing our place of business, we did not receive the original bill for appropriate documents. Please waive all late fees.

Sincerely,

Waymond Calhoun