

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90196 011 \*\*\*150.00

**DOCUMENT # L02619**

**1. Entity Name**  
**CONSTRUCTION NOTICE AND COLLECTION CORPORATION**

**Principal Place of Business**

590 PLM BCH BLVD  
 ROYAL PLM BCH FL 33411

**Mailing Address**

590 PLM BCH BLVD  
 ROYAL PLM BCH FL 33411

00053290



DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business**

390 Business Parkway

Suite, Apt. #, etc.

Suite #L

City & State

Royal Palm Beach, FL

Zip

33411

Country

USA

**3. Mailing Address**

390 Business Parkway

Suite, Apt. #, etc.

Suite #L

City & State

Royal Palm Beach, FL

Zip

33411

Country

USA

**4. FEI Number** 65-0134544

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**

DEINEMA, STEPHEN J  
 590 ROYAL PLM BCH BLVD  
 ROYAL PLM BCH FL 33411

Name

Jeffrey B. Lampert, Esq.

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

590 Royal Palm Beach Blvd.

City

Royal Palm Beach

FL

Zip Code

33411

**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.

Jeffrey B. Lampert

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/01

**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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** P ☐ Delete  
**NAME** DEINEMA, STEPHEN J  
**STREET ADDRESS** 4431 WESTROADS DR. STE. 202  
**CITY-ST-ZIP** W. PALM BCH. FL 33407

**TITLE** President ☒ Change ☐ Addition  
**NAME** Deinema, Stephen J.  
**STREET ADDRESS** 390 Business Parkway, Ste. L  
**CITY-ST-ZIP** Royal Palm Beach, FL 33411 ☒ Change ☐ Addition

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** Director ☐ Change ☒ Addition  
**NAME** Deinema, Stephen J.  
**STREET ADDRESS** 390 Business Parkway, Ste. L  
**CITY-ST-ZIP** Royal Palm Beach, FL 33411 ☒ Change ☐ Addition

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ 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. 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

4/27/01

561-309-3123

Date

Daytime Phone #

CR2E034 (10/00)