## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 13, 2000 8:00 am Secretary of State **DOCUMENT # L21201** 1. Entity Name PRINCETON CONSTRUCTION CO., INC. 01-13-2000 90026 013 \*\*\*150.00 Principal Place of Business Mailing Address 1801 THONOTOSASSA RD 3226 KILMER DR PLANT CITY FL 33567-2739 SUITE 4 60001438 PLANT CITY FL 33566 A 1788 YORK YARI BARRAYAR ARAK ARAK ARAK 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2976270 Not Applicable Zip Country Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent - - 6. Name and Address of Current Registered Agent Name COOK, ARTHUR G. Street Address (P.O. Box Number is Not Acceptable) 3226 KILMAR DRIVE PLANT CITY FL 33567 Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Atter MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PD CR2E034 (9/99 TITLE ☐ Change ☐ Addition ☐ Delete TITLE COOK, ARTHUR G. NAME NAME STREET ADDRESS 3226 KILMER DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33567 ☐ Change Addition ☐ Delete TITLE TITLE COOK, BEN D. NAME NAME 1652 SPRINGHOUSE TR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF VIRGINIA BEACH VA 23455 .. Change 💄 🗔 Addition .. TITLE a - \_ Defete TITLE COOK, DOROTHY J. NAME NAME STREET ADDRESS STREET ADDRESS 3226 KILMER DR CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33567 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Addition Delete Change NAME NARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE NAME STREET ADDRESS 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.