

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L24994**

1. Entity Name
LEE DAVENPORT BUILDERS, INC.

Principal Place of Business
**% LESLIE GENE DAVENPORT
338 NE GREENBRIAR AVE
PORT ST. LUCIE FL 34983**

Mailing Address
**% LESLIE GENE DAVENPORT
338 NE GREENBRIAR AVE
PORT ST. LUCIE FL 34983**

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 **65-0153629**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE



**DAVENPORT, LESLIE GENE
338 NE GREENBRIAR AVE
PORT ST. LUCIE FL 34983**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **DAVENPORT, LESLIE GENE**
STREET ADDRESS **338 NE GREENBRIAR AVE**
CITY-ST-ZIP **PT. ST. LUCIE FL**

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

TITLE **S** ☐ Delete
NAME **DAVENPORT, JOY V.**
STREET ADDRESS **338 NE GREENBRIAR AVE.**
CITY-ST-ZIP **PT. ST. LUCIE FL**

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
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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: *Leslie G. Davenport*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-23-01

561-340-4017

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90003 025 ***150.00

0130268 AT

CR2E034 (5/01)

Doc A

*\$500.00
L24994*

**Lee Davenport Builders Inc.
338 N.E. Greenbrier Ave.
Port St Lucie, FL 34983**

To whom it may concern,

When I received this uniform business report the fee was \$550.00. At that time I called your office and inquired about the amount. They informed me that this was a second request and a late fee was imposed. At that time I informed the state that I did not receive the first request. I informed your office that I would check my records to see if I missed it or misplaced it and call back. I did that and found no record of receiving the form and called back to your office. They informed me to file the form and pay \$150.00 and write a letter explaining the problem and ask that the late fee be waved. Any help in this would be appreciated.

Thank You,

Lee Davenport

Lee Davenport, Pres.