

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **L32971**

1. Entity Name
CORR CONSTRUCTION, INC.



Principal Place of Business
**% FRANCIS E. CORR
1416 HARTLEY CIR
DELTONA FL 32725**

Mailing Address
**% FRANCIS E. CORR
1416 HARTLEY CIR
DELTONA FL 32725**

2. Principal Place of Business

11016 Bitterroot Cir

Suite, Apt. #, etc.

3. Mailing Address

11016 Bitterroot Cir.

Suite, Apt. #, etc.

City & State
Clermont FL.

City & State
Clermont FL.

Zip
34711

Country
U.S.

Zip
34711

Country
U.S.

4. FEI Number

59-2979419

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORR, FRANCIS E.
1416 HARTLEY CIR W
DELTONA FL 32725**

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. I am familiar with, and accept the obligations of registered agent.

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

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution: **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**P
CORR, FRANCIS E.
1416 HARTLEY CIR W
DELTONA FL**

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

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CITY-ST-ZIP

Change Addition

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TITLE
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CITY-ST-ZIP

Change Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Francis E. CORR*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/03

Date

Daytime Phone #

CR2E034 (10/02)

3
01/09/03
FD