

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 14, 2000 8:00 am**
Secretary of State

04-14-2000 90103 039 ***150.00

DOCUMENT # L42640

1. Entity Name

CANABEC CONSTRUCTION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**4300 BAYWOOD BLVD
C 104
MONT DORA FL 32757
US**

Mailing Address
**4300 BAYWOOD BLVD
C 104
MONT DORA FL 32757-2103
US**

2. Principal Place of Business
36438 N CR 44A

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State
Eustis FL

City & State

4. FEI Number **65-0161471**

Applied For
☐ Not Applicable

Zip **32736** Country **Lake**

Zip

Country

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

6. Name and Address of Current Registered Agent

**MAHEUX, DONALD
4300 BAYWOOD BLVD
APT C-104
MOUNT DORA FL 32757**

7. Name and Address of New Registered Agent

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 \$150.00
After MAY 1, 2000 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	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MAHEUX, DONALD		NAME		
STREET ADDRESS	4300 BAYWOOD BLVD C 104		STREET ADDRESS	36438 N CR 44A	
CITY-ST-ZIP	MT DORA FL		CITY-ST-ZIP	EUSTIS FL 32236	
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MAHEUX, CHRISTIAN		NAME		
STREET ADDRESS	4300 BAYWOOD BLVD C-104		STREET ADDRESS	36438 N CR 44A	
CITY-ST-ZIP	MOUNT DORA FL		CITY-ST-ZIP	EUSTIS FL 32236	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: Donald Maheux **Donald Maheux** 4-10-00 352 357 2300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #