

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90347 017 ***150.00

DOCUMENT # L64475

1. Entity Name

NATIONAL RETAIL CONSTRUCTION INCORPORATED

Principal Place of Business

Mailing Address

2. Principal Place of Business

1922 VICTORIA AVENUE

Suite, Apt. #, etc.

SUITE A

City & State

FORT MYERS, FL

Zip

33901

Country

USA

3. Mailing Address

1922 VICTORIA AVENUE

Suite, Apt. #, etc.

SUITE A

City & State

FORT MYERS, FL

Zip

33901

Country

USA

4. FEI Number

65-0158926

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

Name

MCCONNELL, MICHAEL D.

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

1922 VICTORIA AVENUE, SUITE A

City

FORT MYERS

FL

Zip Code
33901

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

Mike McConnell

MICHAEL D. MCCONNELL, PRESIDENT

4.30.01

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, 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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
MCCONNELL, LEWIS J.
818 COLUMBINE DRIVE
BISHOP, CA**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
MCCONNELL, MICHAEL D.
1922 VICTORIA AVENUE, SUITE A
FORT MYERS, FL 33901**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
MCCONNELL, BETTY L.
818 COLUMBINE DRIVE
BISHOP, CA**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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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:

Mike McConnell

MICHAEL D. MCCONNELL, PRES.

4.30.01

(941) 573-8008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)