

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90736 002 ***150.00

DOCUMENT # L77139

1. Entity Name
HOLBEN CONSTRUCTION COMPANY



Principal Place of Business

**333 N. FALKENBURG RD
SUITE B-203
TAMPA FL 33619
US**

Mailing Address

**333 N FALKENBURG RD
SUITE B-203
TAMPA FL 33619
US**

2. Principal Place of Business

1505 W. Windhorst Rd
Suite, Apt. #, etc.

3. Mailing Address

1505 W Windhorst Rd
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Brandon FL

City & State

BRANDON FL

4. FEI Number

65-0196945

Applied For

Not Applicable

Zip

33510

Country

Hillsborough

Zip

33510

Country

Hillsborough

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HOLLOWAY, MICHAEL-T.
333 N FALKENBURG RD
SUITE B-203
TAMPA FL 33619**

7. Name and Address of New Registered Agent

Name

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

1505 W. Windhorst Rd.

City

BRANDON

FL

Zip Code

33510

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

TITLE **DPST** ☐ Delete
NAME **HOLLOWAY, MICHAEL T.**
STREET ADDRESS **1505 W WINDHORST**
CITY-ST-ZIP **BRANDON FL 33510**

TITLE **VP** ☐ Delete
NAME **HOLLOWAY, MICHAEL T.**
STREET ADDRESS **1505 W WINDHORST**
CITY-ST-ZIP **BRANDON FL 33510**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Change ☒ Addition
NAME **VP Holloway, Vicki J.**
STREET ADDRESS **1505 W. Windhorst**
CITY-ST-ZIP **Brandon, FL 33510**

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

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

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)