

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L94711

1. Entity Name

CONSTRUCT TWO CONSTRUCTION MANAGERS, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90034 028 ***158.75

Principal Place of Business

Mailing Address

4409 OLD WINTER GARDEN ROAD
ORLANDO FL 32811
US

4409 OLD WINTER GARDEN ROAD
ORLANDO FL 32811-4212
US

2. Principal Place of Business

30 S. IVEY LANE

3. Mailing Address

30 S. IVEY LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

ORLANDO, FL

Zip

32811

Country

USA

Zip

32811

Country

USA

4. FEI Number

65-0234257

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WILLIAMS, KEITH N.
4409 OLD WINTER GARDEN ROAD
ORLANDO FL 32811

7. Name and Address of New Registered Agent

Name

KEITH N. WILLIAMS

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

30 S. IVEY LANE

City

ORLANDO

FL

Zip Code

32811

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

TITLE **D** ☐ Delete
NAME WILLIAMS, KEITH N.
STREET ADDRESS 1649 RAVENALL AVE
CITY-ST-ZIP ORLANDO FL

TITLE **P** ☐ Delete
NAME WALLACE, DERRICK
STREET ADDRESS 4409 OLD WINTER GARDEN ROAD
CITY-ST-ZIP ORLANDO FL

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME WILLIAMS, KEITH N.
STREET ADDRESS 30 S. IVEY LANE
CITY-ST-ZIP ORLANDO, FL 32811

TITLE **P** ☒ Change ☐ Addition
NAME WALLACE, DERRICK
STREET ADDRESS 30 S. IVEY LANE
CITY-ST-ZIP ORLANDO, FL 32811

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)