

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N50666

1. Entity Name

FLORIDA ASSOCIATED GENERAL CONTRACTORS FOR BETTE ✓

FILED
Jul 28, 2000 8:00 am
Secretary of State

07-28-2000 90002 021 ****61.25

Principal Place of Business

304 N. MERIDIAN ST.
 STE. 1
 TALLAHASSEE FL 32301
 US

Mailing Address

P.O. BOX 10569
 TALLAHASSEE FL 32302
 US

2. Principal Place of Business

200 W. College Ave

3. Mailing Address

Suite, Apt. #, etc.

Suite 205

City & State

Tallahassee FL

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

32301

Country

USA

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DOUGLAS, R. ALLEN
 304 N. MERIDIAN ST.
 STE. 1
 TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

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

200 W. College Ave
 Suite 205

City

Tallahassee

FL

Zip Code

32301

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

Allen Douglas Allen Douglas

7/24/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE T ☐ Delete
 NAME DOUGLAS, R. ALLEN
 STREET ADDRESS 304 N. MERIDIAN ST.
 CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE PD ☒ Delete
 NAME RASCHE, JIM
 STREET ADDRESS 2201 LUCIEN WAY STE 29
 CITY-ST-ZIP MAITLAND FL 32751

TITLE VD ☒ Delete
 NAME HEDRICK, DALE
 STREET ADDRESS 110 TECHNOLOGY PI STE 122
 CITY-ST-ZIP WEST PALM BEACH FL 33407

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 10

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 200 W. College Ave Ste 205
 CITY-ST-ZIP Tallahassee FL 32301

TITLE PD ☐ Change ☒ Addition
 NAME Dale Hedrick
 STREET ADDRESS 110 Technology Place Ste 122
 CITY-ST-ZIP West Palm Beach FL 33407

TITLE VD ☐ Change ☒ Addition
 NAME James Cummings
 STREET ADDRESS 3575 NW 53rd St.
 CITY-ST-ZIP Ft. Lauderdale, FL 33309

TITLE VD ☐ Change ☒ Addition
 NAME Larry Gerwig
 STREET ADDRESS 620 Drew St.
 CITY-ST-ZIP Clearwater FL 33755

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

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 617, 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:

Allen Douglas Allen Douglas

7/24/00

850 222 2421

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR 1:07 (1:00)