

4/3/1

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N95000001077**

1. Entity Name

NORTH CENTRAL FLORIDA BUILDERS COUNCIL, INC.**FILED**
May 18, 2001 8:00 am
Secretary of State

04-03-2001 90080 045 ****61.25

Principal Place of Business

Mailing Address

4020 US HWY 90 WEST
LAKE CITY FL 32055
USPO BOX 2407
LAKE CITY FL 32056
US

2. Principal Place of Business

3. Mailing Address

1232 Bay A Avenue

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Lake City Florida

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

32055

US

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

PERRY, FREDERICK
ROUTE 4 BOX 286
LAKE CITY FL 32024

Name

DAVID E. MANGRUM

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

Rt 6 Box 323

City

LAKE CITY

FL

Zip Code

32025

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



DAVID E. MANGRUM

3-9-2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES IS \$81.259. 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	PD	☒ Delete
NAME	CRAWFORD, STANLEY	
STREET ADDRESS	RT 10 BOX 970	
CITY-ST-ZIP	LAKE CITY FL	
TITLE	VD	☐ Delete
NAME	ZECKER, BRIAN	
STREET ADDRESS	PO BOX 815 QUAILS COURT	
CITY-ST-ZIP	LAKE CITY FL	
TITLE	T	☐ Delete
NAME	MC GEE, TOM	
STREET ADDRESS	3 SAINT JAMES AVENUE	
CITY-ST-ZIP	LAKE CITY FL 32025	Treasurer
TITLE	BM	☒ Delete
NAME	PEELER, CHARLES	
STREET ADDRESS	PO BOX 2322	
CITY-ST-ZIP	LAKE CITY FL 32056-2322	
TITLE	BM	☒ Delete
NAME	MILLER, TED	
STREET ADDRESS	3600 SOUTH 1ST ST.	
CITY-ST-ZIP	LAKE CITY FL 32025	
TITLE	BM	☒ Delete
NAME	PERRY, FREDRICK	
STREET ADDRESS	RT. 4 BOX 286	
CITY-ST-ZIP	LAKE CITY FL 32024	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☐ Change ☒ Addition
NAME	David E. mangrum	
STREET ADDRESS	Rt 6 Box 323	
CITY-ST-ZIP	LAKE CITY FL 32025	
TITLE	Matthew ERKinger	☐ Change ☒ Addition
NAME	Matthew ERKinger	
STREET ADDRESS	Rt 17 Box 1135	Vice President
CITY-ST-ZIP	LAKE CITY, FL 32055	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Glenn I. Jones, Jr.	☐ Change ☒ Addition
NAME	Glenn I. Jones, Jr.	
STREET ADDRESS	811 N. 5th St.	
CITY-ST-ZIP	LAKE CITY, FL 32055	
TITLE	Lonnie Hattiwanger	☐ Change ☒ Addition
NAME	Lonnie Hattiwanger	
STREET ADDRESS	P.O. Box 2199	
CITY-ST-ZIP	LAKE CITY FL 3	
TITLE	Eddie Kutz	☒ Change ☒ Addition
NAME	Eddie Kutz	
STREET ADDRESS	5 W. Duval St	
CITY-ST-ZIP	LAKE CITY FL 32255	

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:



3-09-2001

386-752-4716

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)