

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003889

1. Entity Name

LAFAYETTE ACRES ROAD PAVING, INC.

FILED
Aug 28, 2002 8:00 am
Secretary of State

08-28-2002 90037 034 ****61.25

Principal Place of Business

Mailing Address

6566 CHEVY WAY DRIVE
TALLAHASSEE FL 32311

6566 CHEVY WAY DRIVE
TALLAHASSEE FL 32311

977012



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3660522

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

DOVE, JOYCE SIBSON ESQ.
2074 THOMASVILLE RD.
TALLAHASSEE FL 32312

Name

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

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	PACE, WILLIAM R	6566 CHEVY WAY DRIVE	TALLAHASSEE FL 32311	☐	☐
D	SMITH, RICHARD	6688 CHEVY WAY DRIVE	TALLAHASSEE FL 32311	☐	☐
D	REESE, ANDREW J	6670 CHEVY WAY DRIVE	TALLAHASSEE FL 32311	☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

CP2E037 (9/01)

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: WILLIAM R. PACE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/02 850-656-1303