

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90361 044 ***150.00

DOCUMENT # P00000003095

1. Entity Name
LARUE'S CLEARING & FILL, INC.

Principal Place of Business
7006 ATLANTIC BOULEVARD
JACKSONVILLE FL 32211-8706

Mailing Address
7006 ATLANTIC BOULEVARD
JACKSONVILLE FL 32211-8706



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 **59-3615284**

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

LARUE, JIMMY
7006 ATLANTIC BOULEVARD
JACKSONVILLE FL 32211-8706

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. 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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
LARUE, JIMMY
7006 ATLANTIC BOULEVARD
JACKSONVILLE FL 32211-8706 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
LARUE, JIMMY
7006 ATLANTIC BOULEVARD
JACKSONVILLE FL 32211-8706 ☐ Delete

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

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CITY-ST-ZIP
☐ Change ☐ Addition

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

70902 5093505
Date Daytime Phone

CR2E034 (4/02)

Attachment

#P0000003095
121056

July 9, 2002
Jacksonville, Fl.

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, Fl. 32302-1500

I received notice from my accountant on July 3, 2002 that I was suppose to file a report in Jan. 2002. I was unaware of this and called Tallahassee and talked to terry I believe and she advised me to send in the report and explain that I never received notice to file. I appreciate it if you could waive the penatly. Enclose is a check for 150.00.

Sincerely,



Jimmy D. LaRue