

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State

02-12-2001 90249 046 ***150.00

DOCUMENT # P00000009070

1. Entity Name

FLORIDA REPUBLIC CONTRACTS, INC.

Principal Place of Business

Mailing Address

15880 N. GREENWAY-HAYDEN LOOP, STE. 100
 SCOTTDALE AZ 85260

15880 N. GREENWAY-HAYDEN LOOP, STE. 100
 SCOTTDALE AZ 85260



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

110 S.E. 6th Street

110 S.E. 6th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

28th floor

28th floor

City & State

Ft. Lauderdale FL

City & State

Ft. Lauderdale

4. FEI Number

65-1024352

Applied For

Not Applicable

Zip

33301

Country

US

Zip

33301

Country

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

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	D			<input checked="" type="checkbox"/>
	SLAGER, DONALD W	15880 N. GREENWAY-HAYDEN LOOP, STE. 100	SCOTTDALE AZ 85260	
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	D			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Hudson Harris W.	110 S.E. 6th Street, 28th floor	Ft. Lauderdale, FL 33301		
	P			<input type="checkbox"/>	<input checked="" type="checkbox"/>
	O'Connor, James E.	110 S.E. 6th Street, 28th floor	Ft. Lauderdale, FL 33301		
	VP/S			<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Barclay, David A.	110 S.E. 6th Street, 28th floor	Ft. Lauderdale, FL 33301		
	T			<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Lang, Edward A.	110 S.E. 6th Street, 28th floor	Ft. Lauderdale, FL 33301		
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 affidavit, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David A. Barclay, V.P. / Sect. 954-769-2400

Date

Daytime Phone #

CR2E034 (10/00)