## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Mar 15, 2001 8:00 am DOCUMENT # P00000018310 **Secretary of State** 1. Entity Name 03-15-2001 90030 009 \*\*\*150.00 RGI Concrete Contractors, Incorporated Principal Place of Business Mailing Address 1015 Atlantic Blvd. Same Suite 240 Atlantic Beach, FL 32233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3686596 Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Stephen A. Hould, Esquire Street Address (P.O. Box Number is Not Acceptable) 444 Third Street Neptune Beach, FL 32266 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) , Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Defete TITLE Change ☐ Addition Davis, William J. NAME NAME 1015 Atlantic Blvd., Ste.240 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Atlantic Beach, FL 32233 VP/D ☐ Addition TITLE Delete TITLE Change F: Michael Leinenweber NAME NAME STREET ADDRESS STREET ADDRESS 1015 Atlantic Blvd., Ste. 240 CITY-ST-ZIP CITY-ST-ZIP Atlantic Beach, FL 32233 TITLE\_ VP/T/D \_ Delete\_ TITLE \_\_\_Change\_\_\_ Addition NAME NAME Robert R. Leinenweber STREET ADDRESS STREET ADDRESS 1015 Atlantic Blvd., Ste. 240 CITY-ST-7IP CITY-ST-ZIP Atlantic Beach, FL 32233 TITI F ☐ Change ☐ Addition TITLE NAME NAME Leinenweber, Lara STREET ADDRESS STREET ADDRESS 1015 Atlantic Blvd., Ste. 240 CITY-ST-ZIP CITY-ST-ZIP Atlantic Beach, FL 32233 TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 life empowered.

WILLIAM J. DAVIS, TR. 3/8/01

Daytime Phone #