2001 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

154 CRESCENT BEACH DRIVE

COCOA BEACH FL 32931

DOCUMENT # P0000087334

Entity Name

Principal Place of Business

154 CRESCENT BEACH DRIVE

COCOA BEACH FL 32931

CITY-ST-ZIP

STREET ADDRESS

changed, or on an attachme

SIGNATURE:

CITY-ST-ZiP

TITLE

NAME

BBG HOME CONSTRUCTION, INC.

									. 1811 1 111 1 111		
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. F	4. FEI Number 59-3670145			pplied For at Applicable		
Zip	Zip Country Zip		Zip	Country		5 . C	5. Certificate of Status Desired See Required			ditional	
	6. Name	and Address of Current I	Registered Agent			7. N	lame and Address of New Re	egistered A	gent		
-					Name				<u> </u>		
GRAY, R. STEVE 154 CRESCENT BEACH DRIVE COCOA BEACH FL 32931					Street Address (P.O. Box Number is Not Acceptable)						
					• .						
					City			FL	Zip Cod	ė	
							ent, or both, in the State of Flo				
SIGNATURE Signature typed or orinted name of registered agent and the if applicable. (NOTE: Registe 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After MAY 1, 2001 Fe							10. Election Campaign Fin	~)0 May Be	
(See criter	ria on back)	X	Make Check Pay				Trust Fund Contribution	n. L	I Added	d to Fees	
11.		OFFICERS AND		12.		AD	DITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	154 CRES	LESTER THOMAS SCENT BEACH DRIVE BEACH FL 32931	☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		STEVE SCENT BEACH DRIVE BEACH FL 32931	☐ Delete						Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		l				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	☐ Addition	
TITLE NAME STREET ADDRESS			☐ Delete	TIT! NAM STR					☐ Change	Addition	

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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

TITLE

NAME

☐ Delete

II other like empowered.

FILED

Mar 02, 2001 8:00 am Secretary of State

Change

Addition

03-02-2001 90033 025 ***150.00