

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 03, 2002 8:00 am
Secretary of State

05-20-2002 90012 013 ***150.00

DOCUMENT # P00000089808

1. Entity Name

EMERALD COAST CONSTRUCTION OF NORTHWEST FLORIDA, INC.

Principal Place of Business

5805 SAUFLEY FIELD RD.
PENSACOLA FL 32526

Mailing Address

5805 SAUFLEY FIELD RD.
PENSACOLA FL 32526

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

915 Brandermill Dr.

3. Mailing Address

915 Brandermill Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Cantonment, FL

City & State

Cantonment, FL

4. FEI Number

59-3679167

Applied For

Not Applicable

Zip
32533Country
U.S.A.Zip
32533Country
U.S.A.

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLEMING, EDWARD P
4300 BAYOU BLVD., #13
PENSACOLA FL 32503

7. Name and Address of New Registered Agent

Name Eric Todd Stafford
 Street Address (P.O. Box Number is Not Acceptable) 915 Brandermill Drive
 City Cantonment FL Zip Code 32533

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

Eric Todd Stafford, Pres./Owner 4/29/02

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 \$150.00
After May 1, 2002 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

TITLE GP
 NAME TIPPENS, GARY
 STREET ADDRESS 4400 BAYOU BLVD STE 6-B
 CITY-ST-ZIP PENSACOLA FL 32503

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President
 NAME Stafford, Eric Todd
 STREET ADDRESS 915 Brandermill Drive
 CITY-ST-ZIP Cantonment, FL 32533

☐ Change☒ Addition

TITLE
 NAME
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 STREET ADDRESS
 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Gary Tippens

Date

Daytime Phone #

4/29/02 850-937-9133