

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 04, 2001 8:00 am
Secretary of State

05-04-2001 90161 050 ***150.00

DOCUMENT # P00000097001

1. Entity Name

MOULTON CONSTRUCTION & ROOFING, INC.

Principal Place of Business

Mailing Address

**4496 WESLEY DR.
TALLAHASSEE FL 32303**

**4496 WESLEY DR.
TALLAHASSEE FL 32303**

2. Principal Place of Business

4760 Baywind Dr.

3. Mailing Address

4760 Baywind Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pensacola, FL

City & State

Pensacola, FL

4. FEI Number

59-3675586

Applied For

Not Applicable

Zip

32514-7814

Country

USA

Zip

32524-7814

Country

USA

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

**MOULTON, GREGORY F
4496 WESLEY DR.
TALLAHASSEE FL 32303**

Name

Moulton, Gregory F.

Street Address (P.O. Box Number is Not Acceptable)

4760 Baywind Dr.

City

Pensacola

FL

32514-7814

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

Gregory F. Moulton

Gregory F. Moulton

03/23/01

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, 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	PT	<input type="checkbox"/> Delete
NAME	MOULTON, GREGORY F	
STREET ADDRESS	4496 WESLEY DR.	
CITY-ST-ZIP	TALLAHASSEE FL 32303	
TITLE	S	<input type="checkbox"/> Delete
NAME	MOULTON, KARENA M	
STREET ADDRESS	4496 WESLEY DR.	
CITY-ST-ZIP	TALLAHASSEE FL 32303	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	4760 Baywind Dr.	
CITY-ST-ZIP	Pensacola, FL 32514-7814	
TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	4760 Baywind Dr.	
CITY-ST-ZIP	Pensacola, FL 32514-7814	
TITLE	Vice-President / D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Nathan S. Willet	
STREET ADDRESS	12 Polaris Dr.	
CITY-ST-ZIP	Milton, FL 32570	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gregory F. Moulton

Gregory F. Moulton

03/23/01

(850) 478-5574

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)