

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91217 024 ***150.00

DOCUMENT # P01000011797

1. Entity Name

FIRST COAST TRACTOR SERVICE, INC.

Principal Place of Business

345 Redwing Lane
 St. Augustine, FL 32080

Mailing Address

345 Redwing Lane
 St. Augustine, FL 32080

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3694415

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name Hall, Charles E. Jr.

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

77 Almeria Street

City St. Augustine

FL

Zip Code 32084

Hall, Charles E. Jr.
 77 Almeria Street
 St. Augustine, FL 32084

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 reappointing)

DATE

**9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.**
 (See criteria on back) ☐

**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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PST **Moore, Velda J.** ☐ Change ☒ Addition
NAME
STREET ADDRESS 345 Redwing Lane
CITY-ST-ZIP St. Augustine, FL 32080

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V **Derocher, Norman E. Jr.** ☐ Change ☒ Addition
NAME
STREET ADDRESS 345 Redwing Lane
CITY-ST-ZIP St. Augustine, FL 32080

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Velda Moore

4/24/02

CD25034 (4/1/00)