## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

Mailing Address PO BOX 461

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

CRYSTAL SPRINGS FL 33524

## P01000013739 OCUMENT #

39348 ATLANTA

Principal Place of Business

CRYSTAL SPRINGS FL 33524

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

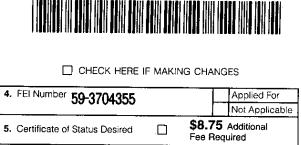
BURTÓN L. FISH CONSTRUCTION, INC.



**FILED** Mar 21, 2003 8:00 am § Secretary of State

03-21-2003 90098 038 \*\*\*150.00

10042963



6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FISH, RONALD W Street Address (P.O. Box Number is Not Acceptable) 39348 ATLANTA PO BOX 461 **CRYSTAL SPRINGS FL 33524** City

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×	The above named entity submits this statement for the oursess of above its annual res	
٠.	The above named entity submits this statement for the burbose of chariting its tegistered office or registered agent, or both, in the chara of Elorida. To	المستسيم المستم اطفانين ممالات ممكورهم
	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. I a	an iambai wiin, and accept
	the obligations of registered agent.	miner and oppositely
	the obligations of registered agent.	

Country

SIGNATURE

FILE NOW!!! FEE IS \$150.00

Country

(NOTE: Registered Agent signature required when reinstating)

After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Zip Code

10.	OFFICERS AND DIRECTOR	₹S	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
CITY-ST-ZIP	PTD FISH, MICHELLE B 39348 ATLANTA PO BOX 461 CRYSTAL SPRINGS FL 33524	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS	VSD FISH, RONALD W 39348 ATLANTA PO BOX 461 CRYSTAL SPRINGS FL 33524	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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SIGNATURE:

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 10 or Block 11 if