

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 26, 2002 8:00 am
Secretary of State

02-19-2002 90072 046 ***150.00

DOCUMENT # P01000018383

1. Entity Name
TRIPLE S CONSTRUCTION, INC.

Principal Place of Business

**27820 S.W. 46TH AVENUE
NEWBERRY FL 32669**

Mailing Address

**27820 S.W. 46TH AVENUE
NEWBERRY FL 32669**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3699143

Applied For

Not Applicable

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

**SMITH, LUCAS L
27820 S.W. 46TH AVENUE
NEWBERRY FL 32669**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☐ Delete
NAME **SMITH, LANNIS**
STREET ADDRESS **6634 VIRGINIA BEACH LANE**
CITY-ST-ZIP **KEYSTONE HEIGHTS FL 32656**

TITLE ☒ Change ☐ Addition
NAME **Lannis, Smith**
STREET ADDRESS **6634 Virginia Beach Lane**
CITY-ST-ZIP **Keystone Heights FL 32656**

TITLE **VD** ☐ Delete
NAME **SMITH, LUCAS L**
STREET ADDRESS **27820 S.W. 46TH AVENUE**
CITY-ST-ZIP **NEWBERRY FL 32669**

TITLE **PD** ☒ Change ☐ Addition
NAME **Smith, Lucas L**
STREET ADDRESS **27820 S.W. 46th Ave.**
CITY-ST-ZIP **Newberry FL 32669**

TITLE **S** ☐ Delete
NAME **SMITH, CHAD**
STREET ADDRESS **4315 S.W. 282ND STREET**
CITY-ST-ZIP **NEWBERRY FL 32669**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lucas L. Smith

9-4-02 (352)222-5075

Date Daytime Phone #

CR2E034 (4/02)

Attachment

43067

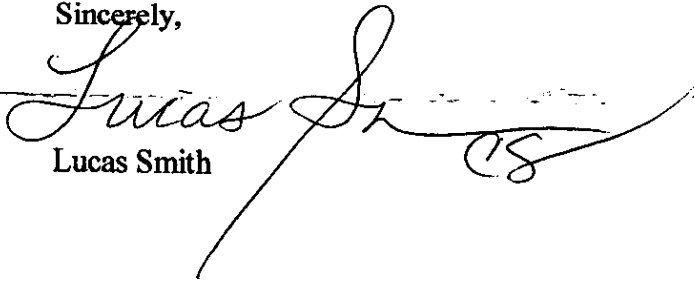
PO1 000018353

September 1, 2002

To Whom It May Concern:

Please note that I omitted my FIN number when submitting this report. Therefore, I am resubmitting this report including the FIN number. Note that the fee has already been paid.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Lucas Smith', followed by a long horizontal flourish.

Lucas Smith