

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 09, 2002 8:00 am**  
**Secretary of State**

09-09-2002 90017 004 \*\*\*150.00

**DOCUMENT # P01000018806**

**1. Entity Name**  
**EMPRIC CONSTRUCTION CONSULTING, INC.**

**Principal Place of Business**  
**12341 FOREST HIGHLANDS DR.**  
**DADE CITY FL 33525**

**Mailing Address**  
**12341 FOREST HIGHLANDS DR.**  
**DADE CITY FL 33525**

**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**

**59-3711763**

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**

**EMPRIC, THOMAS W**  
**18909 PORTOFINO DR.**  
**TAMPA FL 33647**

Name

**EMPRIC, THOMAS W.**

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

**12341 FOREST HIGHLANDS DR.**

City

**DADE CITY**

FL

Zip Code

**33525**

**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** Thomas W. Emprie  
 Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/1/2002  
 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** **D** ☐ Delete  
**NAME** **EMPRIC, THOMAS W**  
**STREET ADDRESS** **18909 PORTOFINO DR.**  
**CITY-ST-ZIP** **TAMPA FL 33647**

**TITLE** ☒ Change ☐ Addition  
**NAME**  
**STREET ADDRESS** **12341 FOREST HIGHLANDS DR.**  
**CITY-ST-ZIP** **DADE CITY, FL 33525**

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

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

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**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.**

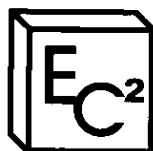
**SIGNATURE:** Thomas W. Emprie **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/2002  
 Date

352-588-2590  
 Daytime Phone #

CR2E034 (4/02)



**Empric**  
Construction Consulting, Inc.

*Attachment*

*# PD1000018806*

September 1, 2002

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Gentlemen:

I am writing this letter to inform your office that Empric Construction Consulting, Inc. never received the prior notice regarding submitting the enclosed 2002 Uniform Business Report and, asking that you waive any penalties or late fees.

I have enclosed a check in the amount of \$150.00, which represents the annual filing fee.

I trust this request will be granted and no additional penalties will be imposed. Thank you for your consideration.

Very truly yours,

*Thomas W. Empric*

Thomas W. Empric  
President  
Empric Construction Consulting, Inc.