

AMENDED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 OCT 27 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☒ CHECK HERE IF MAKING CHANGES

DOCUMENT # P01000020352 1. Entity Name STEINHATCHEE CONSTRUCTION, INC.					
Principal Place of Business 215 1ST AVE SE 6 STEINHATCHEE, FL 32359			Mailing Address P.O. BOX 399 STEINHATCHEE, FL 32359		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 01-0630603 27-0099731	
Zip		Country		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		
HUNTEMAN, WILLIAM R 215 1ST AVE SE STEINHATCHEE, FL 32359			Name George Y. Sayar Street Address (P.O. Box Number is Not Acceptable) 6501 Arlington Expressway Suite B-105 City Jacksonville FL Zip Code 32222		
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			George Y. Sayar, President (NOTE: Registered Agent's signature required when resigning)		
FILE NOW WITH FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LEE, DON F 1034 DAMRON RD STEINHATCHEE, FL 32359	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P S D George Y. Sayar 3655 Fallon Oaks Drive Jacksonville, FL 32277
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HUNTEMAN, WILLIAM F 215 1ST AVE SE STEINHATCHEE, FL 32359	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BURKS, MARTIN R 22604 SEA BASS DR STEINHATCHEE, FL 32359	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 400024168044 10/27/03--01066--009 **61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:			William F. Huntman Secretary SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

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