

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90106 034 ***150.00

980917



DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000038686
1. Entity Name
TREASURE COAST CARPENTRY & EXCAVATING, INC.

Principal Place of Business **Mailing Address**
1569 SW WILDCAT TRAIL **1569 SW WILDCAT TRAIL**
STUART FL 34997-4801 **STUART FL 34997-4801**

2. Principal Place of Business **3. Mailing Address**
1569 SW Wildcat Trail **SAME**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
Stuart Florida
Zip **Country** **Zip** **Country**
34997 **Martin**

4. FEI Number **Applied For**
65-1093679 **Not Applicable**
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MCCARTHY, JOHN W JR
1569 SW WILDCAT TRAIL
STUART FL 34997-4801

7. Name and Address of New Registered Agent
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 _____ **DATE** _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MCCARTHY, JOHN W JR 1569 SW WILDCAT TRAIL STUART FL 34997-4801	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President MCCARTHY JOHN W. JR 1569 SW Wildcat Trail STUART FLA. 34997	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. MCCARTHY JOHN W. SR. 3494 SE Jefferson St STUART FLA 34997	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Geo Gonzalez George L 3799 SE Gatehouse Cir. STUART FL 34994	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: _____ **9/4/02** **772-221-9364 OFF**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **561-475-7322 cell**
 Date Daytime Phone #

CR2E034 (4/02)

Attachment

980917

PO 10000 3868

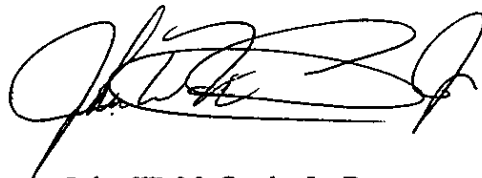
Treasure Coast Carpentry
1569 SW Wildcat TR
Stuart, Fla. 34997

Department of State Division of Corporations

To Whom It May Concern:

I spoke to someone in your department on Monday 9/9/02, And told them that this is the first notice that I received for the annual report. I was shocked by the cost. They told me being that I did not receive a prior notice for the annual report that I should explain it in a letter and send a check for \$150.00.

Enclosed: Uniform Business Report; Check for \$150.00 and this letter explaining that we did not receive a prior notice.

 Pres.

John W. McCarthy Jr. Pres.