

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90442 004 ***150.00

DOCUMENT # P01000048232

1. Entity Name

GATOR CONCRETE TOPPING, INC.

Principal Place of Business

**27517 MILLER ROAD
 DADE CITY FL 33525**

Mailing Address

**27517 MILLER ROAD
 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. FEL Number

59-3719451

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BRYANT, DEBRA
 27517 MILLER ROAD
 DADE CITY FL 33525**

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.

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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	D BRYANT, DEBRA 27517 MILLER ROAD DADE CITY FL 33525	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRYANT, DEBRA 27517 MILLER RD DADE CITY, FL 33525	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Revels, DALE A. 27451 MILLER RD. DADE CITY, FL 33525	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRYANT, Wesley 27517 MILLER ROAD DADE CITY, FL 33525	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Revels, Debbie 27451 MILLER ROAD DADE CITY, FL 33525	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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; and I am a duly elected officer of the corporation or the person authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 12, or on an attachment, with an address, with all other like empowered.

SIGNATURE:

DALE A. REVELS
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DALE A. REVELS Pres. 3-6-02 352-588-3968
 Date Daytime Phone #

CR2E034 (9/01)