## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P01000078364 DOCUMENT #

1. Entity Name

RADLIFF TRUCKING & LAND CLEARING, INC.



## **FILED** Mar 06, 2003 8:00 am Secretary of State

03-06-2003 90090 042 \*\*\*150.00

Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  ITILE  RADLIFF, KIM E  STREET ADDRESS CITY-ST-2P  ORANGE CITY FL 32763  ITILE  NAME STREET ADDRESS CITY-ST-2P  ITILE  N														
Suite, Apt. 4, etc.  City & State  City & State  City & State  Country  Country  Country  Country  Country  Country  Country  S. Certificate of Status Desired  \$8.75 Additional Fee Replacement Agent  7. Name and Address of Current Registered Agent  Fee Required  Fee R	595 CYPRESS AVE			595	595 CYPRESS AVE					{ <b>/201183</b> 1 (11 <b>00)</b> 41 (10)	l Silif B Sil	i dan dan	i <b>egg</b> i i <b>e</b> ire ji	il <b>e o</b> liki elek kest
City & State  Country	2. Principal I	Place of Busin	ness	3. Mailing Address										
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Zip Country Zip Country Sign Co	City & State			City & State					A SELNIUMPO					
S. Name and Address of New Registered Agent   Same   Sam	Zip Country			Zip			ountry			····			\$8.75	dditional
RADUFF, S95 CYPRESS AVE  ORANGE CITY FL 32763  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. The both in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  FLE NOW!!! FEE IS \$150.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  SIREL NOWES  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  MAKE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  MAKE  MAKE  SIREL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  MAKE	<del></del>	6. Name	and Address of Curre	nt Register	ed Agent 🥌 🚐 —	<u></u>			7. N	lame and Address of I	lew Do	aistored		ired
Size Address (P.O. Box Number is Not Acceptable)  City FL 32783  City FL 27 Code  City FL 32783  B. The above named entiry 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 private frame of improved agent and life if appropriate in private in the purpose of changing its registered defice 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 private frame of improved agent and life if appropriate in the purpose of changing its registered defice or registered agent, or both. In the State of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the State of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the State of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the State of Florida. I am familiar with, and accept the obligations of registered agent, or both. In the State of Florida. I am familiar with, and accurate agent and several agent agent, or both. In the State of Florida. I am familiar with, and accurate agent							Name		,,,,	same and Address Of F	icw ne	gratereu	Agein	<del></del>
ORANGE CITY FL 32763  City FL Zip Code  City FL	RADLIFF,							Country (20 2						
6. 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 or registered agent.  SIGNATURE  SIGNATURE  FILE NOW!! FEE IS \$150.00  **After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS N 11  TILE  NAME  SIREFADORES  GITY-ST-2P  TILE  MAKE  SIREFADORES  GITY-ST-2P  TILE  MAK	595 CYPF	RESS AVE	»					Street Address (P.O. Box Number is Not Acceptable)						
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. I am familiar with, and accept the obtigations of registered agent.    Signatural type of private or private registered agent and title? #apolication   PADE	ORANGE	CITY FL 32	763			Ì	) <del></del> :					***		
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