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

P01000084895 DOCUMENT



FILED

Mar 19, 2003 8:00 am Secretary of State 1. Entity Name 03-19-2003 90149 015 ***150.00 AMERICAN DESIGN CONSTRUCTION, INC. Principal Place of Business Mailing Address 23775 SOUTHWEST 122ND AVENUE 23775 SOUTHWEST 122ND AVENUE PRINCETON FL 33032 PRINCETON FL 33032 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-1134353 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA. Box Number is Not Acc 1840 SW 22ND ST. MIAMI FL 3314 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 SIGNATUR re, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 3 FILE NOW!!! 'FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE Defete TITLE Change ■ Addition BELCHER, JAMES W NAME NAME 23775 SOUTHWEST 122ND AVENUE STREET ADDRESS STREET ADDRESS PRINCETON FL 33032 CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition BRODHEAD, RICHARD A NAME NAME STREET ADDRESS 23775 Southwest 122ND Avenue STREET ADDRESS CITY-ST-ZIP PRINCETON FL 33032 CITY-ST-ZIP TITLE Delete TITLE Change Addition BURKE, WILLIAM JR NAME NAME STREET ADDRESS 23775 SOUTHWEST 122ND AVENUE STREET ADDRESS CITY-ST-ZIP PRINCETON FL 33032 CITY-ST-ZIP TITLE ☐ Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 atta

SIGNATURE