

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90122 046 ***150.00

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DOCUMENT # P01000094253

1. Entity Name
BC CONSTRUCTION OF GULF BREEZE, INC.



Principal Place of Business
**4554 KELLY LANE
GULF BREEZE FL 32563**

Mailing Address
**4554 KELLY LANE
GULF BREEZE FL 32563**



2. Principal Place of Business

3. Mailing Address

6080 Gulf Breeze Pkwy

P.O. Box 5490

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Gulf Breeze FL

City & State
NAVARRE FL

4. FEI Number **59-3746941**

Applied For
Not Applicable

Zip
32563 32563

Country
Santa Rosa

Zip
32564

Country
Santa Rosa

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

**CURRENCE, STEVEN BRETT
4554 KELLY LANE
GULF BREEZE FL 32563**

Name

Street Address (P.O. Box Number is Not Acceptable)

7836 Sleepy Bay Blvd

City

FL

Zip Code

32564

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/16/03

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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
**PD
CURRENCE, STEVEN
4554 KELLY LANE
GULF BREEZE FL 32563**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**7836 Sleepy Bay Blvd
NAVARRE FL 32564**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
CURRENCE, KATHY
4554 KELLY LANE
GULF BREEZE FL 32563**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**7836 Sleepy Bay Blvd
NAVARRE FL 32564**

☒ Change ☐ Addition

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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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/16/03

CR2E034 (10/02)