

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 23, 2002 8:00 am**  
**Secretary of State**

07-23-2002 90335 002 \*\*\*150.00

**DOCUMENT # P01000095424**

1. Entity Name  
**CITY CONTRACTORS, INC.**

Principal Place of Business

~~800 E. ELKAM CIRCLE #3~~  
~~MARCO ISLAND FL 34145~~

Mailing Address

~~800 E. ELKAM CIRCLE #3~~  
~~MARCO ISLAND FL 34145~~

2. Principal Place of Business

**907 Panama Ct**  
 Suite, Apt. #, etc. **# 404**

3. Mailing Address

**907 Panama Ct**  
 Suite, Apt. #, etc. **#404**

City & State

~~Marco Island FL~~

City & State

~~Marco Island FL~~

4. FEI Number

**65-1141741**

Applied For

Not Applicable

Zip

**34145**

Country

**Collier**

Zip

**34145**

Country

**Collier**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**E. GLENN TUCKER**  
**950 NORTH COLLIER BLVD.**  
**SUNTRUST CENTRE - SUITE 204**  
**MARCO ISLAND FL 34145**

7. Name and Address of New Registered Agent

Name **JACK D. ASHCRAFT**  
 Street Address (P.O. Box Number is Not Acceptable)  
**907 PANAMA CT**  
**#404**  
 City **MARCO ISLAND** **FL** Zip Code **34145**

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

(NOTE: Registered Agent signature required when reinstating)

**07/12/02**  
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 \$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	<b>PRESIDENT</b> <b>JACK D. ASHCRAFT</b> <b>907 PANAMA CT #404</b> <b>MARCO ISLAND, FL 34145</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TREASURER</b> <b>SHARON M. ASHCRAFT</b> <b>907 PANAMA CT #404</b> <b>MARCO ISLAND, FL 34145</b>	<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		<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
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: *[Signature]* **JACK D. ASHCRAFT** **7/12/02**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **941-389-2829**  
Date Daytime Phone #

CR2E034 (4/02)

Attachment PO1000095424

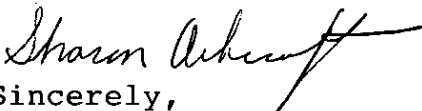
City Contractors, Inc.  
907 Panama Court #404  
Marco Island, FL. 34145

July 12, 2002

Florida Department Of State

I'm writing this letter because I never recieved the first notice of this form. When I called your office they told me to send a check of \$150.00 with a letter. Please note the correct address.

Thank You.



Sincerely,

City Contractors