

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-01-2002 91582 040 ***150.00

DOCUMENT # P01000109273

1. Entity Name

RICHARD EDGAR FENCING COMPANY, INC.

Principal Place of Business

14232 88TH PLACE, NORTH
LOXAHATCHEE FL 33470

Mailing Address

14232 88TH PLACE, NORTH
LOXAHATCHEE FL 33470

86120



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

90-0000782

Applied For

Not Applicable

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

Name

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

City

FL

Zip Code

EDGAR, RICHARD
 14232 88TH PLACE, NORTH
 LOXAHATCHEE FL 33470

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V. President ☐ Delete
 NAME Maria Edgar
 STREET ADDRESS 14232 88th Pl N
 CITY-ST-ZIP Loxahatchee, FL 33470

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE President ☐ Delete
 NAME Richard Edgar
 STREET ADDRESS 14232 88th Pl N
 CITY-ST-ZIP Loxahatchee, FL 33470

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Thomas Dennison ☐ Change ☒ Addition
 NAME V. Pres.
 STREET ADDRESS 14232 88th Pl N.
 CITY-ST-ZIP Loxahatchee, FL 33470

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V. President ☐ Change ☒ Addition
 NAME T.J. Salter
 STREET ADDRESS 14232 88th Pl N
 CITY-ST-ZIP Loxahatchee, FL 33470

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Maria Edgar
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/02
 Date

561-718-7654
 Daytime Phone #

CR2034 (9/01)