

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90299 039 ***150.00

DOCUMENT # P01000118178

1. Entity Name
INNERCOASTAL CONSTRUCTION INC.

Principal Place of Business

1824 PALADIN LANE
WESTVILLE FL 32464

Mailing Address

1824 PALADIN LANE
WESTVILLE FL 32464



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1016 HICKORY AVE

Suite, Apt. #, etc.

3. Mailing Address

1016 HICKORY AVE

Suite, Apt. #, etc.

City & State

INVERNESS FLA

City & State

INVERNESS FLA

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

34452

Country

CITRUS

Zip

34452

Country

CITRUS

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BALLARD, BOBBY
1824 PALADIN LANE
WESTVILLE FL 32464

7. Name and Address of New Registered Agent

Name

Bobby BALLARD

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

1016 HICKORY AVE

INVERNESS FLA

City

Inverness

FL

Zip Code

34452

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

Bobby Ballard

Bobby BALLARD

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

TITLE **D** ☒ Delete
NAME **BALLARD, BOBBY**
STREET ADDRESS **1824 PALADIN LANE**
CITY-ST-ZIP **WESTVILLE FL 32464**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **BOBBY BALLARD**
STREET ADDRESS **1016 HICKORY AVE**
CITY-ST-ZIP **INVERNESS FL 34452**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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:

Bobby Ballard

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-02

Date

352-302-8081

Daytime Phone #

CR2E034 (9/01)