

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2003 8:00 am
Secretary of State

09-09-2003 90026 008 ***150.00

0139921 AT

DOCUMENT # P02000015141	
1. Entity Name C. MARTIN CONSTRUCTION INC.	

Principal Place of Business 1050 KANSAS AVE. ENGLEWOOD FL 34223	Mailing Address 1050 KANSAS AVE. ENGLEWOOD FL 34223
---	---

2. Principal Place of Business 910 Suncrest Lane	3. Mailing Address 910 Suncrest
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Englewood FL	City & State Englewood FL
Zip 34223	Zip 34223
Country US	Country US

4. FEI Number 01-0634536	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent MARTIN, CRAIG 1050 KANSAS AVE. ENGLEWOOD FL 34223	
---	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable) 910 Suncrest Lane	
City Englewood	Zip Code FL 34223

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 _____

FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
PD MARTIN, CRAIG 1050 KANSAS AVE. ENGLEWOOD FL 34223	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
MARTIN, JENNIFER 910 SUNCREST LANE ENGLEWOOD, FL 34223	
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
910 SUNCREST LANE ENGLEWOOD, FL 34223	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" 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

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: **9/4/03** Daytime Phone #: **941-270-1499**

CR2E034 (4/03)

Attachment

86145993
#D02000015141

910 Suncrest Lane
Englewood, FL 34223

C. Martin Construction Inc.

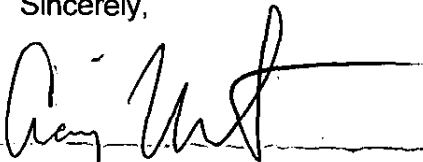
September 3, 2003

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

I am writing this letter to notify you that my company, C. Martin Construction Inc., did not receive the prior notice to file a Uniform Business Report. I am requesting that the \$400.00 late fee be waived.

Sincerely,



Craig Martin
President/Director