

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90094 017 ***150.00

DOCUMENT # P02000022624

1. Entity Name
CASWELL CONCRETE, INC.



Principal Place of Business
**195 BASSIEUX BOULEVARD
WEST MELBOURNE FL 32907**

Mailing Address
**195 BASSIEUX BOULEVARD
WEST MELBOURNE FL 32907**

2. Principal Place of Business
195 BOSSIEUX BND.
Suite, Apt. #, etc.

3. Mailing Address
195 BOSSIEUX BND.
Suite, Apt. #, etc.

City & State
WEST MELBOURNE, FL

City & State
WEST MELBOURNE, FL.

4. FEI Number
01-0624747

Applied For
Not Applicable

Zip
32904

Country
USA

Zip
32904

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CASWELL, TROY R
195 BASSIEUX BOULEVARD
WEST MELBOURNE FL 32907**

7. Name and Address of New Registered Agent

Name
YVETTE M. CASWELL
Street Address (P.O. Box Number is Not Acceptable)
7640 NORTHERN OAK STREET
City
WEST MELBOURNE, FL Zip Code
32904

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 *Yvette M Caswell* **YVETTE CASWELL, Pres.** **01-03-03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CASWELL, TROY R
100 PRINCE AVENUE
MELBOURNE FL 32901** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V/T/D
CASWELL, TROY R.
7640 NORTHERN OAK STREET
WEST MELBOURNE, FL. 32904** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/S
CASWELL, YVETTE M
7640 NORTHERN OAK STREET
WEST MELBOURNE, FL. 32904** ☐ Change ☒ Addition

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

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

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

TITLE
NAME
STREET ADDRESS
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: *Troy R. Caswell* **TROY R. CASWELL**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-03-03 321-509-8165
Date Daytime Phone #

CR2E034 (10/02)