

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-14-2003 90357 010 ***150.00

DOCUMENT # P02000042428

1. Entity Name
BRADANNA CONSTRUCTION, INC.



Principal Place of Business
**4901 EAST TAMiami TRAIL, STE. 200
NAPLES FL 34113**

Mailing Address
**4901 EAST TAMiami TRAIL, STE. 200
NAPLES FL 34113**

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

30-0079756

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DAVID MCELATH, P.A.
3939 TAMiami TRAIL NORTH, #410
NAPLES FL 34103**

7. Name and Address of New Registered Agent

Name **STEINMANN, BRAD W.**

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

3725 27th AVE SW

City **NAPLES FL 34117**

FL

Zip Code **34117**

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]

BRAD W. STEINMANN, PRESIDENT

4-11-03

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

(NOTE: Registered Agent signature required when reissuing)

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 **PO** ☐ Delete
NAME **STEINMANN, BRADFORD W**
STREET ADDRESS **4901 EAST TAMiami TRAIL, STE. 200**
CITY-ST-ZIP **NAPLES FL 34113**

TITLE **VD** ☐ Delete
NAME **STEINMANN, JOSEPH E**
STREET ADDRESS **4901 EAST TAMiami TRAIL, STE. 200**
CITY-ST-ZIP **NAPLES FL 34113**

TITLE **D** ☐ Delete
NAME **STEINMANN, BRADFORD E SR.**
STREET ADDRESS **4901 EAST TAMiami TRAIL, STE. 200**
CITY-ST-ZIP **NAPLES FL 34113**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

4-11-03

239-455-8891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)