

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P020000068667

1. Entity Name

Alderman General Contracting, Inc.



FILED

2011 MAY -3 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1516 Harbor Drive

3. Mailing Address

Box 501897

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Marathon Florida

City & State

Marathon Florida

Zip

33050

Country

USA

Zip

33050

Country

USA

4. FEI Number

03-0466046

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

700207092527

05/03/11--01037--008 **150.00

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Jon W. Alderman

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

1516 Harbor Drive

City

Marathon

FL

Zip Code

33050

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

Jon W. Alderman, President

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

(NOTE: Registered Agent signature required when renewing)

DATE

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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	President
NAME	Jon Alderman
STREET ADDRESS	1516 Harbor Drive
CITY - ST - ZIP	Marathon, Florida 33050
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Jon W. Alderman

Jon W. Alderman, President

4/22/11

Date

Daytime Phone #

229-
560-6930

CR2E034B (12/02)

12H