

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

04-30-2003 90070 038 ***150.00

DOCUMENT # P02000070104

1. Entity Name
B & D ASPHALT SERVICE, INC.



Principal Place of Business
**195 RANGE ROAD
COCOA, FL 32927**

Mailing Address
**195 RANGE ROAD
COCOA, FL 32927**

2. Principal Place of Business
195 Range Road

3. Mailing Address
195 Range Road

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Cocoa, Fl.

City & State
Cocoa, Fl.

4. FEI Number
59-3120168

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**ACUFF, DENNIS
195 RANGE ROAD
COCOA, FL 32927**

7. Name and Address of New Registered Agent
Name
Acuff, Dennis
Street Address (P.O. Box Number is Not Acceptable)
195 Range Road
City
Cocoa, FL Zip Code
32926

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 *Dennis Acuff* **Dennis Acuff, President** **07-28-03**

(NOTE: Registered Agent signature required when appointing)

FILE NOW! FEE IS \$150.00
After May 1, 2003 Fee will be \$350.00
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	☐ Delete	TITLE PTD	☒ Change ☐ Addition
NAME ACUFF, DENNIS		NAME Acuff, Dennis	
STREET ADDRESS 195 RANGE ROAD		STREET ADDRESS 195 Range Road	
CITY-ST-ZIP COCOA, FL 32927		CITY-ST-ZIP Cocoa, Fl. 32926	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: *Dennis Acuff* **Dennis Acuff, President** **(321)631-3675** **07-28-03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)