

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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

04-30-2003 90323 003 ***150.00

DOCUMENT # P02000091687

1. Entity Name
AMERICAN COMMERCIAL CONTRACTING, INC.



Principal Place of Business
6335 LITTLE LAKE GENEVA RD
KEYSTONE HEIGHTS, FL 32656

Mailing Address
6335 LITTLE LAKE GENEVA RD
KEYSTONE HEIGHTS, FL 32656

2. Principal Place of Business
5950 CR 315 C
Suite, Apt. #, etc.

3. Mailing Address
5950 CR 315 C
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
KEYSTONE HEIGHTS, FL
Zip
32656

City & State
KEYSTONE HEIGHTS, FL
Zip
32656

4. FEI Number
11-3648772

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ADGURSON, STEPHANIE L
6335 LITTLE LAKE GENEVA RD
KEYSTONE HEIGHTS, FL 32656

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
5950 CR 315 C
KEYSTONE HEIGHTS FL Zip Code **32656**

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 *Stephanie L. Adgursion*

STEPHANIE L. ADGURSON
PRESIDENT

28 APR 2003

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

(NOTE: Registered Agents Signature Required when submitting)

DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	ADGURSON, STEPHANIE L	
STREET ADDRESS	6335 LITTLE LAKE GENEVA RD	
CITY-ST-ZIP	KEYSTONE HEIGHTS, FL 32656	
TITLE	D	☐ Delete
NAME	ADGURSON, DANIEL R	
STREET ADDRESS	6335 LITTLE LAKE GENEVA RD	
CITY-ST-ZIP	KEYSTONE HEIGHTS, FL 32656	
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	D	☒ Change ☐ Addition
NAME	ADGURSON, STEPHANIE L.	
STREET ADDRESS	5950 CR 315 C	
CITY-ST-ZIP	KEYSTONE HEIGHTS, FL 32656	
TITLE	D	☒ Change ☐ Addition
NAME	ADGURSON, DANIEL R.	
STREET ADDRESS	5950 CR 315 C	
CITY-ST-ZIP	KEYSTONE HEIGHTS, FL 32656	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 190.07(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: *Stephanie L. Adgursion*

STEPHANIE L. ADGURSON 904-813-
PRESIDENT 28 APR 03 6461

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

CR20034 (10/02)