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

## P02000094261 **DOCUMENT #**

1. Entity Name

GERARD O'NEILL CONSTRUCTION INC.



**FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90954 048 \*\*\*158.75

	<del> </del>												
Principal Place of Business 1143 FEATHER DRIVE DELTONA FL 32725			Mailing Address 1143 FEATHER DRIVE DELTONA FL 32725						(		TIEL DIRIG EFÈT	0f131 1191 1681	
2. Principal P	lace of Busir	ness	3. Mailing Address										
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES					
City & State			City & State			4.			Number -3867	189		oplied For ot Applicable	
Zip Country			Zip	Countr	Country 5.			ertificate of Status Desired		<b>\$8.75</b> Add Fee Require			
	6. Name	and Address of Current	Registere	ed Agent			7. Name and Address of New Registered Agent						
			-	-			Name - :						
O'NEILL,	gerard Ther Driv	ıc					Street Address (P.O. Box Number is Not Acceptable)						
	FL 32725				<u> </u>								
DELIGITA	( ) E 02/20	A		•							Tim Cod		
						City				FL	Zip Code	е	
	named entitions of regis		or the purp	ose of changing its	registered	d office or	registere	d ager	nt, or both, in the State of Flo	rida. I am f	amiliar with,	and accept	
SIGNATURE .	Signature, typed	or printed narrierof registered agent	and title if app	olicable. (NOTI	E: Registered	Agent signati	ure required w	hen reins	stating)	DATE			
Afte	r May 1, 200	!! FEE 18 \$150.00 03 Fee willing \$550.00 o Florida Begartment o	of State						9. Election Campaign Fin Trust Fund Contribution			<b>0</b> May Be I to Fees	
10.		OFFICERS AND		l PRS	11.		-	ADD	ITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11	
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NAME		GERARD			NAME		Tim	Ju	stiniano			1	
STREET ADDRESS	SS 1143 FEATHER DRIVE TO DELTONA FL 32725					STREET ADDRESS CITY-ST-ZIP		Fe	ather Drive ona, FL 3272				
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CITY-ST-ZIP					CITY-	51-ZIP	I						

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.