

2007

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

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90203 017 ***150.00

DOCUMENT # P06000102587
1. Entity Name Finley Construction Company

DO NOT WRITE IN THIS SPACE

40081760

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 741 Westwind Dr. Suite, Apt. #, etc.	3. Mailing Address 741 Westwind Dr. Suite, Apt. #, etc.
City & State North Palm Beach, FL Zip 33408	City & State North Palm Beach, FL Zip 33408
Country USA	Country USA

4. FEI Number 20-5331385	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Watson, Richard F.	
	Street Address (P.O. Box Number is Not Acceptable) 741 Westwind Dr.	
	City North Palm Beach	Zip Code FL 33408

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$160.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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 NAME STREET ADDRESS CITY - ST - ZIP	D/P/T Watson, Richard F. 741 Westwind Dr. North Palm Beach, FL 33408	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S Watson, Maria T. 741 Westwind Dr. North Palm Beach, FL 33408	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard F. Watson

Date

4/20/07

Daytime Phone #

561-352-5856