

FILED  
Apr 10, 2002 8:00 am  
Secretary of State

04-10-2002 90665 015 \*\*\*150.00

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

DOCUMENT # P92000003548

1. Entity Name

Morgan & Sons Construction, Inc.

**DO NOT WRITE IN THIS SPACE**

B0064186

2. Principal Place of Business

17200 Pioneer Street

Suite, Apt. #, etc.

ML-11

3. Mailing Address

17200 Pioneer Street

Suite, Apt. #, etc.

ML-11

DO NOT WRITE IN THIS SPACE

City & State

North Fort Myers, FL

City & State

North Fort Myers, FL

4. FEI Number

650369718

Applied For

Not Applicable

Zip

33917

Country

USA

Zip

33917

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Hollan J. Morgan

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

17200 Pioneer Street

ML-11

City

North Fort Myers

FL

Zip Code

33917

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P  
Hollan J. Morgan  
17200 Pioneer Street, ML-11  
North Fort Myers, FL 33917

TITLE  
NAME  
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CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Hollan J. Morgan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOLLAN J. MORGAN

3-5-02

Date

941-567-2295

Daytime Phone #

CR2E034B (12/01)