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

## P93000030303 **DOCUMENT #**

1. Entity Name

SIGNATURE:

VILLAGE CONSTRUCTION COMPANY, INC.

			•			WE S			
Principal Place of Business 1046 LAKE FRANCIS DRIVE APOPKA FL 32712 US			1046	Mailing Address 1048 LAKE FRANCIS DRIVE APOPKA FL 32712 US					
. Principal P	Place of Busi	ness	<b>3.</b> Mai	3. Mailing Address				I IDBANDDI AID IRIOD HIIN GOIN DONN DONN DONN DANN INN PRADENIN ABADD HIN IBD	
Suite, Apt.	#, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES	
City & State			City	City & State				FEI Number 59-3176725 Applied For Not Applied be	
-Zip Country			Zip Cou			ntry 5.		Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name	and Address of Current	Registere	ed Agent	1	1	7. 1	Name and Address of New Registered Agent	
				<b></b>		Name			
•	CHARD D. E FRANCIS	S DRIVE		Street Add			lress (P.O. Box Number is Not Acceptable)		
apopka i	FL 32712								
						City		FL Zip Code	
	named enti		or the purp	ose of changing its	register	ed office or regis	stered ag	ent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed	or printed name of registered agent	and title if app	plicable. (NOT	E: Registere	ed Agent signature requ	rired when re	einstating) DATE	
After	r May 1, 20	!! FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department c	of State					9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees	
10.		OFFICERS AND	DIRECTO	RS	11.		ΑD	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		CHARD D. IE FRANCIS DRIVE FL		☐ Delete				☐ Change ☐ Addition	
ITLE IAME STREET ADDRESS CITY-ST-ZIP	·			☐ Delete	- 4	- 1	· managaritir · v	☐ Change ☐ Addition	
ITLE IAME TREET ADDRESS TITY-ST-ZIP				☐ Delete				☐ Change ☐ Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP				☐ Oelete				☐ Change ☐ Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP				☐ Delete				☐ Change ☐ Addition	
ITLE IAME				☐ Delete	TITL:			☐ Change ☐ Addition	

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.

(RICHARD D. WARK) 1/8/03 (407) 886-2701

**FILED** Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90139 028 \*\*\*150.00