

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000083393

1. Entity Name

SOUTHERN STYLE CONSTRUCTION, INC.

FILED

May 07, 2001 8:00 am
Secretary of State

05-07-2001 90037 033 ***150.00

Principal Place of Business

257 KETTLE COURT
CASSELBERRY FL 32707

Mailing Address

257 KETTLE COURT
CASSELBERRY FL 32707

2. Principal Place of Business

170 LYMAN Rd

Suite, Apt. #, etc.

Suite 120

City & State

Casselberry FL

Zip

32707

Country

Seminole

3. Mailing Address

170 LYMAN Rd

Suite, Apt. #, etc.

Suite 120

City & State

Casselberry FL

Zip

32707

Country

Seminole



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3212753

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOUSE, CURTIS A.
257 KETTLE CT
CASSELBERRY FL 32707

7. Name and Address of New Registered Agent

Name Curtis A House

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

170 LYMAN Rd Suite 120

City Casselberry

FL

Zip Code

32707

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 Curtis A House President

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/01

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 P
NAME HOUSE, CURTIS A
STREET ADDRESS 257 KETTLE COURT
CITY-ST-ZIP CASSELBERRY FL ☐ Delete

TITLE ST
NAME HOUSE, DEBORA L
STREET ADDRESS 257 KETTLE COURT
CITY-ST-ZIP CASSELBERRY FL ☒ Delete

TITLE VP
NAME NEWSOME, HARVEY G JR.
STREET ADDRESS 5400 CONWAY PT. CT.
CITY-ST-ZIP ORLANDO FL 32812 ☐ Delete

TITLE VP
NAME AKINS, FRANK
STREET ADDRESS 621 S LAKEWOOD AVE
CITY-ST-ZIP OCOEE FL 32461 ☐ Delete

TITLE VP
NAME BROWN, DAVID
STREET ADDRESS 320 W PALMETTO AVE
CITY-ST-ZIP DELAND FL 32720 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Secretary + Treasurer
NAME Curtis A House
STREET ADDRESS 170 LYMAN Rd Suite 120
CITY-ST-ZIP Casselberry, FL 32707 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME Harvey G. Newsome Jr.
STREET ADDRESS 170 LYMAN Rd Suite 120
CITY-ST-ZIP Casselberry, FL 32707 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/01

CR2E034 (10/00)