2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State
04-16-2001 90025 024 ***150.00

0459818

DOCUMENT # P94000002881

1. Entity Name
GRIDER BUILDERS, INC.

Principal Place of Business	Mailing Address
~~1864 NIGHTFALL DRIVE~~	~~1864 NIGHTFALL DRIVE~~
NEPTUNE BEACH FL 32266	NEPTUNE BEACH FL 32266

946097

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1870 Night Fall Dr	1870 Night Fall Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Neptune Bch, Fl	City & State: Neptune Bch Fl
Zip: 32266 Country: ~~32266~~	Zip: 32266 Country:

4. FEI Number 59-3234377 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NOE, WILLIAM G JR 599 ATLANTIC BOULEVARD SUITE 6 ATLANTIC BEACH FL 32233	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GRIDER, GARY	NAME	
STREET ADDRESS	~~1864 NIGHTFALL DRIVE~~ 1870 Night Fall Dr	STREET ADDRESS	
CITY-ST-ZIP	NEPTUNE BEACH FL 32266	CITY-ST-ZIP	
TITLE	PST ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GRIDER, GARY	NAME	
STREET ADDRESS	~~1864 NIGHTFALL DRIVE~~ 1870 Night Fall Drive	STREET ADDRESS	
CITY-ST-ZIP	NEPTUNE BEACH FL 32266	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Gary Grider — 4/9/01 — 9042497988
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)