FILED

(9/01)

2002 Uniform Business Report (UBR)

Mar 31, 2002 8:00 am Secretary of State DOCUMENT # P94000083500 1. Entity Name 03-31-2002 90344 031 ***158 75 CHILBERG CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 3375 20TH ST. 3375 20TH ST. **SUITE #130 SUITE #130** VERO BEACH FL 32960 VERO BEACH FL 32960 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3285772 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COLLINS, GEORGE G JR Street Address (P.O. Box Number is Not Acceptable) 756 BEACHLAND BLVD VERO BEACH FL 32963 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. 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Detete TITLE CHILBERG, STEVEN NAME NAME 3375 - 20th Street, Ste.#130 STREET ADDRESS 1130 7TH COURT STREET ADDRESS Vero Beach, FL 32960 CITY-ST-ZIP VERO BEACH FL 32960 CITY-ST-ZIP ☐ Delete X Change ☐ Addition TITLE TITLE CHILBERG, BARBARA D NAME NAME STREET ADDRESS 1130 7TH COURT STREET ADDRESS 3375 - 20th Street, Ste.#130 CITY-ST-7IP CITY-ST-ZIP VERO BEACH FL 32960 Vero Beach, FL 32960 ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TIT1 F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY~ST-7IP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is fue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director lee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information indicated on this report or supplement of the corporation or the redeiver or

SIGNATURE: SIGNATURE AND T

ith all other like empowered.

changed, or on an attachm

(561)978-1707