**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jan 24, 2002 8:00 am Secretary of State P94000092990 DOCUMENT # 1. Entity Name 01-24-2002 90365 020 \*\*\*150.00 TERRY D. SPEER CONSTRUCTION, INC. Mailing Address Principal Place of Business : 2711 FOREST CLUB DR 2711 FOREST CLUB DR PLANT CITY FL 33567 PLANT CITY FL 33567 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 5208 Cindy Kay Drive 5208 Cindy Kay Drive Applied For City & State 4. FEI Number 59-3287729 Plant City, FL Not Applicable Plant City Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33567 USA 33567 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPEER, TERRY D Street Address (P.O. Box Number is Not Acceptable) 2711 FOREST CLUB DR 5208 Cindy Kay Drive PLANT CITY FL 33567 Zip Code City Plant City, 33567 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS: 12. Addition Change PTS 🐫 TITLE □ Deleté TITLE NAME SPEER, TERRY D Address NAME 5208 Cindy Kay Drive STREET ADDRESS 2711 FOREST CLUB DR STREET ADDRESS CITY-ST-ZIP Plant City, FL 33567 CITY-ST-ZIP PLANT CITY FL 33567 TITLE M Change ☐ Addition ☐ Delete TITLE NAME Address SPEER, KATHY Y NAME 5208 Cindy Kay Drive STREET ADDRESS 2711 FOREST CLUB DR STREET ADDRESS Plant City, FL 33567 CITY-ST-ZIP PLANT CITY FL 33567 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 truetee 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. RED Terry D. Speer 119102 SIGNATURE:

CITY-ST-ZIP