2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9500000170

1. Entity Name

AAA GATOR CONSTRUCTION, INC.



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

01-13-2003 90694 003 ***150.00

Principal Place of Business 1980 S FABIAN POINT LACANTO FL 34461 US			Mailing Address 1980 S FABIAN POINT LECANTO FL 34461 US					13 1 11 1 12101 21111 8	i jii is iii s oi	 		 	
2. Principa	2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				-	CHECK HERE IF MAKING CHANGES					
City & S	City & State			City & State				4 EELN water					Applied For
, Zip		Country	Zip		Coun	itry		Certificate	of Status Desi		\$8.7		Not Applicable dditional
	6. Nam	e and Address of Currer	t Registere	ed Agent	L	T -		_	Address of N	_	´ Fee F	Reaui	ed
KEMPTO	N, CURTIS	H .IR				Name			TRACTICES OF A	ew negisi	red Agent		
	UTH FABIAI			Stree			ddress (P.O. Box Number is Not Acceptable)						
I	O FL 34461					<u> </u>	·			———			_
8. The above	e named entit	to an in the state of the				City					FL Zi	р Со	de e
the obliga	ations of regist	y submits this statement fered agent.	or the purpo	ose of changing its	registere	d office or	registered a	agent, or both	n, in the State c	f Florida.	am familia	with	and accept
SIGNATURE													
	Signature, typed	or printed name of registered agen	and title if applic	cable. (NOTE:	Registered	Agent signatu	re required when	reinstating)			NTE.		
Afte	r May 1, 200	! FEE IS \$150.00)3 Fee will be \$550.00 Florida Department o	1					9. Elec	ction Campaigr t Fund Contrib	Financina		\$5.0	0 May Be
TITLE	P	OFFICERS AND	DIRECTOR		11.		A	DDITIONS/C	HANGES TO (DEFICERS	AND DIDEC	TOR	C IN 44
NAME STREET ADDRESS CITY-ST-ZIP	KEMPTON,	CURTIS H JR IH FABIAN POINT FL 34461		☐ Delete	NAME STREET CITY-S	ADDRESS T-ZIP					C) Ch		Addition
NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET CITY-ST	ADDRESS I-ZIP			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	☐ Cha	nge	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	·			☐ Delete	TITLE NAME STREET A CITY-ST	ADORESS -ZIP					☐ Cha	nge	Addition
NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A CITY-ST-						☐ Char	ge	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete	TITLE NAME STREET AL CITY-ST-				1		☐ Chan	ge	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- L , .		□ Delete	TITLE NAME STREET AD CITY-ST-2	₂₀					☐ Chang		☐ Addition
2. I hereby cer indicated or of the corpo changed, or	rtify that the in this report of tration or the r on an attach	formation supplied with the supplemental report is treceiver or trustee empowment with an address, with	nis filing doe ue and acci ered to exec h all other lik	is not qualify for the urate and that my si cute this report as re se empowered.	exempti	on stated	in Section 1 the same le 607, Florida	19.07(3)(i), Flagal effect as a Statutes; ar	orida Statutes. if made under nd that my nam	I further ce oath; that I le appears	ertify that the am an office in Block 10	e info er or or Bi	rmation director ock 11 if

SIGNATURE:

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