

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90092 044 ***550.00

DOCUMENT # P95000030233

1. Entity Name
ZION CONSTRUCTION CO.

Principal Place of Business

**5805 PAPAYA DR
 FT PIERCE FL 34982
 US**

Mailing Address

**5805 PPAPYA DR
 FT PIERCE FL 34982
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**4652 S 25TH ST
 Suite, Apt. #, etc.
 Box 7**

3. Mailing Address

**4652 S 25TH ST
 Suite, Apt. #, etc.
 Box 7**

City & State
FT PIERCE FL

City & State
FT PIERCE FL

4. FEI Number **65-0524347**

Applied For
 Not Applicable

Zip
34981

Country
US

Zip
34981

Country
US

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**KOTTHAUS, FREDERICK
 5805 PAPAYA DR
 FT PIERCE FL 34982**

7. Name and Address of New Registered Agent

Name **Frederick Kotthaus**
 Street Address (P.O. Box Number is Not Acceptable)
**4652 S 25TH ST
 Box 7
 City FT PIERCE FL Zip Code 34981**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Frederick Kotthaus*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/11/02

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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	<input type="checkbox"/> Delete
NAME	KOTTHAUS, FREDERICK	
STREET ADDRESS	5805 PAPAYA DR	
CITY-ST-ZIP	FT PIERCE FL 34982	
TITLE	VP	<input type="checkbox"/> Delete
NAME	KOTTHAUS, DERICK	
STREET ADDRESS	3550 S. US 1, LOT 54	
CITY-ST-ZIP	FT PIERCE FL 34982	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	KOTTHAUS, SHIRLEY	
STREET ADDRESS	5805 PAPAYA DR.	
CITY-ST-ZIP	FT. PIERCE FL 34982	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Frederick Kotthaus	
STREET ADDRESS	4652 S 25TH ST Box 7	
CITY-ST-ZIP	FT PIERCE FL 34981	
TITLE	UP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Derick Kotthaus	
STREET ADDRESS	382 SW Violet Ave	
CITY-ST-ZIP	Port St Lucie FL 34982	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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 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: *Frederick Kotthaus*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/02

Date

772-528-0993

Daytime Phone #

CR2E034 (4/02)