

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000057988

1. Entity Name

J & J CONCRETE PUMPING SERVICE, INC.

**FILED**  
**Jan 22, 2000 8:00 am**  
**Secretary of State**

01-22-2000 90022 024 \*\*\*150.00

Principal Place of Business

Mailing Address

360 S. INDUSTRIAL DR.  
ORANGE CITY FL 32763

360 S. INDUSTRIAL DR.  
ORANGE CITY FL 32763-7405

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3334254

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

LOWE, JOY H  
2730 STONE AVE.  
DELAND FL 32720

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 Joy H. Lowe  
Signature, typed or printed name of registered agent and title if applicable.

Joy H. Lowe  
(NOTE: Registered Agent signature required when reinstating)

Jan 11, 2000  
DATE

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, 2000 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 ☐ Delete  
NAME D  
STREET ADDRESS LOWE, JOY H  
CITY-ST-ZIP 565 SANDY PINES DRIVE  
ORANGE CITY FL 32763

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS LOWE, JIM R  
CITY-ST-ZIP 565 SANDY PINES DRIVE  
ORANGE CITY FL 32763

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME V  
STREET ADDRESS LOWE, THOMAS R  
CITY-ST-ZIP 555 SANDY PINES DRIVE  
ORANGE CITY FL 32763

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1460 W. Howry Ave  
CITY-ST-ZIP DELAND, FL 32720

TITLE ☐ Delete  
NAME V  
STREET ADDRESS SWARTZ, STEVEN J  
CITY-ST-ZIP 45832 PINE ST.  
PAISLEY FL 32767

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: Joy H. Lowe, Sec-Treas 1/11/00 904.775.0476  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)