

nt By: JOHNSTON, THOMAS & BILLINGTON; 954 942 3958;
2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91328 017 ***150.00

DOCUMENT # P95000067182
Entity Name ATLANTIC COAST CONST. & DEV., INC.

Principal Place of Business 730 U.S. HWY ONE
MILCO, FL 32976
Mailing Address

Principal Place of Business 8730 U.S. HWY ONE
Suite, Apt. #, etc.
City & State MILCO, FLORIDA
Zip 32976
Country BREVARD
3. Mailing Address Same
City & State
Zip
Country

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
JOSEPH PALADINO
6830 S. HWY A1A
Melbourne, FL 32951

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL **Zip Code**

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 *Michelle Paladino*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

10.	11.
OFFICERS AND DIRECTORS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
☐ Delete	☐ Change ☐ Addition
10.	11.
NAME	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
10.	11.
NAME	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
10.	11.
NAME	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
10.	11.
NAME	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
10.	11.
NAME	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Michelle Paladino 4/26/01