## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)** P95000071589

1. Entity Name

STREET ADDRESS

CITY-ST-ZIP

**DOCUMENT #** 



**FILED** Apr 14, 2003 8:00 am Secretary of State

J H CONSTRUCTION, INC.					04-14-2003 90226 046 ****150.00					
Principal Place of Business 5550 EAST AVE DELEON SPRINGS FL 32130		Mailing Address PO BOX 1138 DELEON SPRINGS FL	· ·							
2. Principal Plac	ce of Business	3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State	City & State		4. FEI Numbe	59-3335661			olied For Applicable	
Zip	Country Zip		Count	ry	5. Certificate	5. Certificate of Status Desired See Required Fee Required				
	6. Name and Address of Cu	rrent Registered Agent			7. Name and	Address of New Ro	gistered Age	ent		
				Name						
Bradley, Edward L 5550 East ave				Street Address (P.O. Box Number is Not Acceptable)						
DELEON SPRINGS FL 32130										
				City			FL	Zip Code	,	
the obligation	amed entity submits this statem is of registered agent.	ent for the purpose of changing		d office or registe		, in the State of Flor	DATE	iliar with, a	and accept	
FILE NOW!!!- FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State					Trus	etion Campaign Fina et Fund Contribution	n. 📮	Added	May Be to Fees	
10. ; ,		AND DIRECTORS	11.		ADDITIONS/0	CHANGES TO OFFI	CERS AND DI	RECTORS	IN 11	
STREET ADDRESS	ST NADLEY, EDWARD LEE O BOX 1138 ((N//A)) ELEON SPRINGS FL 32130	☐ Delete		ET ADDRESS ST-ZIP				] Change	☐ Addition	
NAME TO A STREET ADDRESS CITY-ST-ZIP	\$ 5 \$ 5 \$ 7	☐ Delete		T ADDRESS ST-ZIP				] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete		T ADDRESS	_			] Change	Addition.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP				Change	☐ Addition	
TITLE NAME STREET ADDRESS - CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP				Change	Addition	
TITLE . V. I		Delete	TITLE					] Change	☐ Addition	

12: Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empey

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: R OR DIRECTOR April 11,03