

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 25, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P95000076423**1. Entity Name  
**DAVID BISTARKEY CONSTRUCTION, INC.**Principal Place of Business  
1771 FLAMEVINE PL  
VALKARIA FL MALABAR FL  
32950 32950Mailing Address  
PO BOX 500203

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number  
**59-3347532**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**JACOBY DAVID H  
1581 ROBERT J CONLAN BLVD., NE  
SUITE 100  
PALM BAY FL  
32905 US**7. Name and Address of New Registered Agent**Name  
O'BRIEN JAMES M  
Street Address (P.O. Box Number is Not Acceptable)  
1686 WEST HIBISCUS BLVD  
City  
MELBOURNE FL Zip Code  
32901

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 **JAMES M. O'BRIEN****04/25/2001**

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

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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**TITLE  
NAME STD BISTARKEY DEBORA ☐ Delete  
STREET ADDRESS 1771 FLAMEVINE  
CITY-ST-ZIP MALABAR FL 32950TITLE  
NAME PD BISTARKEY DAVID ☐ Delete  
STREET ADDRESS 1771 FLAMEVINE  
CITY-ST-ZIP MALABAR FL 32950TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE  
NAME STD BISTARKEY DAVID A ☒ Change ☐ Addition  
STREET ADDRESS 1771 FLAMEVINE  
CITY-ST-ZIP MALABAR FL 32950TITLE  
NAME PD HOLDER STEVE J ☒ Change ☐ Addition  
STREET ADDRESS 2859 SCHOOL DR NE  
CITY-ST-ZIP PALM BAY FL 32905TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
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:** Steve J. Holder

PRES

04/25/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)