

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90363 009 ***158.75

DOCUMENT # P95000085194

1. Entity Name
GRANGER MAINTENANCE & CONSTRUCTION, INC.



Principal Place of Business
611 SAM ALLEN ROAD EAST
PLANT CITY FL 33563

Mailing Address
611 SAM ALLEN ROAD East
PLANT CITY FL 33563

2. Principal Place of Business

611 East Sam Allen Rd.
Suite, Apt. #, etc.

3. Mailing Address

611 East Sam Allen Rd.
Suite, Apt. #, etc.

City & State

Plant City, FL

City & State

Plant City, FL

4. FEI Number **59-3344558**

Applied For

Not Applicable

Zip

33563

Country

Hillsborough

Zip

33563

Country

Hillsborough

5. Certificate of Status Desired

☒ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

JEFFCOAT, LORI G.
611 SAM ALLEN ROAD East
PLANT CITY FL 33563

7. Name and Address of New Registered Agent

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

SIGNATURE **Lori Jeffcoat**

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

(NOTE: Registered Agent signature required when reinstating)

1/24/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **GRANGER, JOHN H**
STREET ADDRESS **6041 S.R. 640 W**
CITY-ST-ZIP **BARTOW FL 33802**

TITLE **DTS** ☐ Delete
NAME **JEFFCOAT, LORI G**
STREET ADDRESS **611 E. SAM ALLEN RD. East**
CITY-ST-ZIP **PLANT CITY FL 33563**

TITLE **VP** ☒ Delete
NAME **GRANGER, KEVIN**
STREET ADDRESS **2640 GREEN BAY AVE**
CITY-ST-ZIP **PENSACOLA FL 33526**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Lori Jeffcoat** **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/03
Date

(813) 759-1788
Daytime Phone #

CR2E034 (10/02)