

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 25, 2002 8:00 am
Secretary of State

06-25-2002 90439 008 ***550.00

DOCUMENT # P96000047846

1. Entity Name
DURATEK WALL CORPORATION

Principal Place of Business
2311 U.S. ALTERNATE 19 N.
SUITE 5
PALM HARBOR FL 34693

Mailing Address
2311 U.S. ALTERNATE 19 N.
SUITE 5
PALM HARBOR FL 34693



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

715 WESLEY AVE
 Suite, Apt. #, etc.

3. Mailing Address

715 WESLEY AVE.
 Suite, Apt. #, etc.

City & State
TARPON SPRINGS, FL

City & State
TARPON SPRINGS, FL

4. FEI Number **59-3381217**

Applied For
 Not Applicable

Zip **34689** **Country** **USA**

Zip **34689** **Country** **USA**

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

6. Name and Address of Current Registered Agent

STEM, R. BARRY
2311 U.S. ALTERNATE 19 N.
SUITE 5
PALM HARBOR FL 34693

MOVED TO 715 WESLEY

7. Name and Address of New Registered Agent

Name **STEM, R. BARRY**

Street Address (P.O. Box Number is Not Acceptable)
715 WESLEY AVE

City **TARPON SPRINGS** **FL** **Zip Code** **34689**

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 *[Signature]*
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE **6/17/02**

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE **DVP** ☒ **Delete**
NAME **ALBRITTON, DAVID**
STREET ADDRESS **217 PALM ISLAND NW**
CITY-ST-ZIP **CLEARWATER FL 33767**

TITLE **P D** ☐ **Delete**
NAME **STEM, BARRY R. BARRY**
STREET ADDRESS **2311 ALT. 19 N., STE 5**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **T D** ☐ **Delete**
NAME **MARION H. STEM**
STREET ADDRESS **3275 MEADOW VIEW LANE**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **V P D** ☐ **Delete**
NAME **GARY SPARKS**
STREET ADDRESS **2127 BRANDYWINE COURT**
CITY-ST-ZIP **LAKE LAND, FL 33813**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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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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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/17/02

Date

Daytime Phone #

CR2E034 (9/01)