

2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P96000059029

1. Entity Name
CORONADO CONSTRUCTION CORPORATION

FILED

02 APR 23 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
129 ROBIN ROAD
ALTAMONTE SPRINGS FL 32701
US

Mailing Address
P.O. BOX 4961
ORLANDO FL 32802-4961

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3420028

Applied For
Not Applicable

Zip Country Zip Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 NORTH ORANGE AVE., SUITE 1100
ORLANDO FL 32801

Name
Street Address (P.O. Box Number is Not Acceptable)
100005389001-7
-04/30/02--01012--022
City ****158.75 FL ****158.75

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 _____ (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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPT
NAME PEPPER, DONNA D
STREET ADDRESS 129 ROBIN ROAD
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

TITLE Secretary
NAME DONNA D. PEPPER
STREET ADDRESS 129 Robin Road
CITY-ST-ZIP Altamonte Springs, FL 32701

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: Donna D. Pepper Donna D. Pepper, President 4-17-02 407.599.9998

CR2E034 (9/01)