

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90153 014 ***150.00

DOCUMENT # P96000062235

1. Entity Name

GATE BLUEGRASS PRECAST, INC.

Principal Place of Business

Mailing Address

**9540 SAN JOSE BOULEVARD
JACKSONVILLE FL 32257**

**P OB OX 23627
JACKSONVILLE FL 32241-3627**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3390809

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCCORMICK, JAMES E

**9540 SAN JOSE BLVD
JACKSONVILLE FL 32257**

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.

SIGNATURE

J.E. McCORMACK, SECRETARY

4-19-02

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, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
**DC
LUKE, JOSEPH C
9540 SAN JOSE BOULEVARD
JACKSONVILLE FL 32257** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FOSTER, DAVID M
1301 RIVERPLACE BLVD., SUITE 1500
JACKSONVILLE FL 32207** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
CLEGHORN, BENNY L
402 HECKSCHER DRIVE
JACKSONVILLE FL 32226** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
CASEMAN, JERRY B
9540 SAN JOSE BLVD
JACKSONVILLE FL 32257** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTAS
LUDERS, JACK C JR
9540 SAN JOSE BLVD
JACKSONVILLE FL 32257** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
LIEDERS ☒ Change ☐ Addition
Spelling

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BROCK, STEVE
9540 SAN JOSE BLVD
JACKSONVILLE FL 32257** ☐ Delete

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

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:

J.E. McCORMACK, SECRETARY

4-19-02

904-448-2910

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Attachment # P96000062235

Document # P96000062235

GATE BLUEGRASS PRECAST, INC.

Addition to Officers:

AS
Gwaltney, Joseph F Jr.
9540 San Jose Blvd
Jacksonville, FL 32257

S
McCormack, James E
9540 San Jose Blvd
Jacksonville, FL 32257

V/Controller
Vanlandingham, Charles F

V
Townes, Thomas M

DV
Isenhour, Raymond L