

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2001 8:00 am
Secretary of State

07-31-2001 90009 002 ***550.00

0094717 AV

DOCUMENT # P96000084807

1. Entity Name

KOALA CONSTRUCTION, INC.

Principal Place of Business

**17598 ROCKEFELLER CR
 SUITE 102
 FT MYERS FL 33912
 US**

Mailing Address

**17598 ROCKEFELLER CR
 SUITE 102
 FT MYERS FL 33912
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**17568 ROCKEFELLER CIRCLE
 Suite, Apt. #, etc.
 #2**

3. Mailing Address

**17568 ROCKEFELLER CIRCLE
 Suite, Apt. #, etc.
 #2**

City & State

FORT MYERS, FL

City & State

FORT MYERS, FL

4. FEI Number

65-0770380

Applied For

Not Applicable

Zip

33912

Country

USA

Zip

33912

Country

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**FORD, MARY L
 17598 ROCKEFELLER CR
 SUITE 102
 FT MYERS FL 33912**

7. Name and Address of New Registered Agent

Name **THERESA PRICE**
 Street Address (P.O. Box Number is Not Acceptable)
17568 ROCKEFELLER CIRCLE #2
 City **FORT MYERS** FL Zip Code **33912**

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

(NOTE: Registered Agent signature required when reinstating)

THERESA PRICE

7/18/01

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **P** ☒ Delete
 NAME **FORD, MARY L**
 STREET ADDRESS **17598 ROCKEFELLER CR, 102**
 CITY-ST-ZIP **FT MYERS FL 33912**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Change ☒ Addition
 NAME **THERESA PRICE**
 STREET ADDRESS **17568 ROCKEFELLER CIRCLE #2**
 CITY-ST-ZIP **FORT MYERS, FLORIDA 33912**

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
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THERESA PRICE

DATE

7/18/01

Daytime Phone #

CR2E034 (5/01)