## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

## Jun 05, 2000 8:00 am Secretary of State DOCUMENT # P96000096524 1. Entity Name ADVANCE BUILDERS OF NORTHEAST FLORIDA, INC. 06-05-2000 90004 013 \*\*\*150.00 Principal Place of Business Mailing Address 669 S FLETCHER AVE 669 S FLETCHER AVE FERNANDINA BEACH FL 32034-2251 FERNANDINA BEACH FL 32034 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number. 59-3411917 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VANCE, ERIC Street Address (P.O. Box Number is Not Acceptable) 669 S FLETCHER AVE FERNANDINA BEACH FL 32034 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME VANCE, ERIC STREET ADDRESS STREET ADDRESS 669 S FLETCHER AVE CITY-ST-ZIP CITY-ST-ZIP FERNANDINA BCH FL 32034 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME SEEVERS, GLENN NAME STREET ADDRESS STREET ADDRESS 669 S FLETCHER AVE CITY-ST-ZIP CITY-ST-7IP FERNANDINA BCH FL 32034 □-Change — □ Addition -TITE Delete TITLE MUTTER, MIKS NAMÉ NAME STREET ADDRESS STREET ADDRESS 2743 B OCEAND DRIVE CITY-ST-ZIP CITY-ST-ZIP FERNANDINA BEACH FL 32034 TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZiP 13. Thereby certify that the information supplied with this filling 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

FILED