

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000025064

1. Entity Name

CREATIVE CONCRETE TECHNOLOGY OF CENTRAL FLORIDA,

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90125 006 ***150.00

Principal Place of Business

407 FLATWOOD DRIVE
WINTER SPRINGS FL 32708

Mailing Address

407 FLATWOOD DRIVE
WINTER SPRINGS FL 32708

2. Principal Place of Business

State, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

State, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3434248**

Approved For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARTIN, GEORGE W
407 FLATWOOD DRIVE
WINTER SPRINGS FL 32708

7. Name and Address of New Registered Agent

Name

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

City

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

(Signature, typed or printed name of registered agent or officer filing this report)

(NOTE: Registered Agent Signature required when filing this report)

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, 2001 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

TITLE	D	☐ Delete
NAME	MARTIN, GEORGE W	
STREET ADDRESS	407 FLATWOOD DRIVE	
CITY-STATE-ZIP	WINTER SPRINGS FL 32708	
TITLE	D	☐ Delete
NAME	MARTIN, PAULA J	
STREET ADDRESS	407 FLATWOOD DRIVE	
CITY-STATE-ZIP	WINTER SPRINGS FL 32708	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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, 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

George W. Martin

4/24/01 407-509-3185

CH2E004 (10/00)