

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000038282

1. Entity Name

TRIAD CONTRACTING, INC.

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90003 049 ***150.00

Principal Place of Business

331 SO. FIRST ST.
LAKE WALES FL 33853
US

Mailing Address

331 SO. FIRST ST.
LAKE WALES FL 33853
US

950134

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 **59-3445342**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PARKS, HARRY W
331 S FIRST ST
LAKE WALES FL 33853

7. Name and Address of New Registered Agent

Name **KENNETH B. FITZGERALD**

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

331 SO. FIRST ST.

City

LAKE WALES

FL

Zip Code

33853

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 *Kenneth B. Fitzgerald*

KENNETH B. FITZGERALD

3/8/01

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, 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 **PTD** ☐ Delete
NAME **FITZGERALD, KENNETH BRUCE**
STREET ADDRESS **777 ALTURAS RD.**
CITY-ST-ZIP **BARTOW FL 33830**

TITLE **VSD** ☒ Delete
NAME **PARKS, HARRY WARREN**
STREET ADDRESS **777 ALTURAS RD.**
CITY-ST-ZIP **BARTOW FL 33830**

TITLE **V** ☐ Delete
NAME **HEATH, DIANE G.**
STREET ADDRESS **11 HARVARD AVE**
CITY-ST-ZIP **FROSTPROOF FL 33843**

TITLE **V** ☐ Delete
NAME **BOHLER, ALLEN W**
STREET ADDRESS **7531 HIGHLAND GROVE DR.**
CITY-ST-ZIP **LAKE LAND FL 33810**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE **V/S** ☒ Change ☐ Addition
NAME **HEATH, G. DIANE**
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: *Kenneth B. Fitzgerald*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH B. FITZGERALD

3/8/01

Date

863-679-8165

Daytime Phone #

CR2E034 (10/00)

0380293