

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000053604

FILED  
Apr 30, 2003  
Secretary of State

**Entity Name:** ATLAS STRUCTURAL MOVERS, INC.

**Current Principal Place of Business:**

PO BOX 3179  
SPRING HILL, FL 34606

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3179  
SPRING HILL, FL 34606

**New Mailing Address:**

**FEI Number:** 59-3452093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, SMITTY  
13151 SPRINGHILL DRIVE  
SPRINGHILL, FL 34609 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DANIEL, LAWRENCE D  
Address: 14011 IRVING STREET  
City-St-Zip: BROOKSVILLE, FL 34609

Title: TD ( ) Delete  
Name: HANKINS, JOSEPH  
Address: 7707 N. 17TH AVE.  
City-St-Zip: TAMPA, FL 33604

Title: SD ( ) Delete  
Name: DANIEL, TERRIE L  
Address: 14011 IRVING STREET  
City-St-Zip: BROOKSVILLE, FL 34609

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: DANIEL, TERRIE L  
Address: 14011 IRVING STREET  
City-St-Zip: BROOKSVILLE, FL 34609

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** LAWRENCE D DANIEL

PD

04/30/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date