

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State
 05-21-2002 91132 040 ***150.00

DOCUMENT # P97000063478

1. Entity Name

R. D. CHEATWOOD CONSTRUCTION COMPANY

Principal Place of Business

**4204 BAYMEADOWS RD
 JACKSONVILLE FL 32217**

Mailing Address

**4204 BAYMEADOWS RD
 JACKSONVILLE FL 32217**

US

US

2. Principal Place of Business

8847 SAN JOSE BLVD.

3. Mailing Address

8847 SAN JOSE BLVD.

Suite, Apt. #, etc.

JACKSONVILLE FL

Suite, Apt. #, etc.

JACKSONVILLE FL

City & State

32217

City & State

32217

Zip

Country

Zip

Country

4. FEI Number

59-3467302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**F&L CORP.
 200 LAURA ST., THIRD FLOOR
 JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name

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

City

FL

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 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, 2002 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 **CHEATWOOD, RICHARD D**
 STREET ADDRESS **8168 MADEIRA DR.**
 CITY-ST-ZIP **JACKSONVILLE FL 32217**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
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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:

R. D. Cheatwood
 R. D. CHEATWOOD DIRECTOR

4/29/02 904-732-7040

Date

Daytime Phone #

CR2E034 (9/01)