

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90093 009 ***150.00

DOCUMENT # P97000075608



1. Entity Name
J & R CONSTRUCTION OF BAY COUNTY, FLORIDA, INC.

Principal Place of Business
**165 HITCHCOCK RD
PANAMA CITY FL 32409**

Mailing Address
**PO BOX 936
LYNN HAVEN FL 32444**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3506155**

Applied For
Not Applicable

CHECK HERE IF MAKING CHANGES

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DURHAM, ROY R JR.
165 HITCHCOCK RD
PANAMA CITY FL 32409**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	0	<input type="checkbox"/> Delete
NAME	DURHAM, ROY J	
STREET ADDRESS	165 HITCHCOCK RD	
CITY-ST-ZIP	PANAMA CITY FL 32409	
TITLE	0	<input type="checkbox"/> Delete
NAME	PENDRVIS, JOHNNY	
STREET ADDRESS	165 HITCHCOCK RD	
CITY-ST-ZIP	PANAMA CITY FL 32409	
TITLE		<input type="checkbox"/> Delete
NAME		
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STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Roy R Durham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-03

Date

850-711-0182

Daytime Phone #

CR2E034 (10/02)