

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State
03-29-2001 90378 045 ***158.75

0403614

DOCUMENT # P97000080204

1. Entity Name

NAVARRE CONSTRUCTION, INC.

Principal Place of Business

**2908 CLARK RD. #11
SARASOTA FL 34231**

Mailing Address

**2908 CLARK RD. #11
SARASOTA FL 34231**

2. Principal Place of Business

3914 Mesa Ave.

Suite, Apt. #, etc.

3. Mailing Address

3914 Mesa Ave.

Suite, Apt. #, etc.

City & State

Sarasota, Florida

City & State

Sarasota, Florida

Zip

34233-3743

Country

Sarasota

Zip

34233-3743

Country

Sarasota

4. FEI Number

65-0784317

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required.**

6. Name and Address of Current Registered Agent

**NAVARRE, ROBERT
2908 CLARK RD. #11
SARASOTA FL 34231**

7. Name and Address of New Registered Agent

Name

NAVARRE, ROBERT

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

3914 Mesa Ave.

City

Sarasota**FL**

Zip Code

34233-3743

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, 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	P	<input type="checkbox"/> Delete
NAME	NAVARRE, ROBERT	
STREET ADDRESS	2908 CLARK RD. #11	
CITY-ST-ZIP	SARASOTA FL 34231	

TITLE	S	<input type="checkbox"/> Delete
NAME	RAMOS, JORGE	
STREET ADDRESS	4936 LAS VEGAS DR.	
CITY-ST-ZIP	SARASOTA FL 34233	

TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	YARBROUGH, BARRON	
STREET ADDRESS	175 B GOLF CLUB RD.	
CITY-ST-ZIP	VENICE FL 34293	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Donald Sanders	
STREET ADDRESS	3922 Mesa Ave.	
CITY-ST-ZIP	Sarasota, Florida 34233	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-01

Date

(941) 374-0475

Daytime Phone #

CR2E034 (10/00)