

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000089413

1. Entity Name
RALPH PLANK EXCAVATING, INC.

Principal Place of Business

**7854 SADDLE CREEK TRAIL
SARASOTA FL 34241**

Mailing Address

**7854 SADDLE CREEK TRAIL
SARASOTA FL 34241**

2. Principal Place of Business

8019 S.W. Highway 72
Suite, Apt. #, etc.

3. Mailing Address

8019 S.W. Highway 72
Suite, Apt. #, etc.

City & State

Arcadia, FL

City & State

Arcadia, FL

Zip

34266

Country

USA

Zip

34266

Country

USA

6. Name and Address of Current Registered Agent

**PLANK, RALPH E
7854 SADDLE CREEK TRAIL
SARASOTA FL 34241**

7. Name and Address of New Registered Agent

Name

Plank, Ralph E.

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

8019 S.W. Highway 72

City

Arcadia

Zip Code

34266

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 reconstituting)

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	PLANK, RALPH E.	
STREET ADDRESS	7854 SADDLE CREEK TRAIL	
CITY-ST-ZIP	SARASOTA FL 34241	
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		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Plank, Ralph E.	
STREET ADDRESS	8019 SW Highway 72	
CITY-ST-ZIP	Arcadia, FL 34266	
TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Plank, Nancy J.	
STREET ADDRESS	8019 SW Highway 72	
CITY-ST-ZIP	Arcadia, FL 34266	
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		

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: **Ralph Plank**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/01

Date

941-376-1109

Daytime Phone #

ASK for Nancy

**FILED
Apr 27, 2001 8:00 am
Secretary of State**

04-27-2001 90316 042 ***158.75

646009



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0793439**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

CR2E034 (10/00)

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