

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000101484

1. Entity Name

PERRYMAN CONSTRUCTION SERVICES, INC.

R

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90031 005 ***150.00

Principal Place of Business

20 NE 10TH AVE
CAPE CORAL FL 33909

Mailing Address

20 NE 10TH AVE
CAPE CORAL FL 33909

00000001

2. Principal Place of Business

7231 RADIO RD.

3. Mailing Address

7231 RADIO RD

Suite, Apt. #, etc.

214

Suite, Apt. #, etc.

214

City & State

NAPLES, FL.

City & State

NAPLES, FL.

4. FEI Number

65-0792553

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERRYMAN, CLINT
20 NE 10TH AVE
CAPE CORAL FL 33909

7. Name and Address of New Registered Agent

Name CLINT PERRYMAN

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

3529 WENDFRED ROW LN #3004

City NAPLES

FL

Zip Code 34104

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

CLINT PERRYMAN

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME PERRYMAN, CLINTON ☐ Delete
STREET ADDRESS 20 N.E. 10TH AVE.
CITY-ST-ZIP CAPE CORAL FL 33909

TITLE VP
NAME PERRYMAN, DEANNA ☐ Delete
STREET ADDRESS 20 N.E. 10TH AVE.
CITY-ST-ZIP CAPE CORAL FL 33909

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME PERRYMAN, CLINTON
STREET ADDRESS 7231 RADIO RD. #214
CITY-ST-ZIP NAPLES, FL. 34104-6707

TITLE VP ☒ Change ☐ Addition
NAME PERRYMAN, DIANNA
STREET ADDRESS 7231 RADIO RD. #214
CITY-ST-ZIP NAPLES, FL. 34104-6707

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

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

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

TITLE ☐ Change ☐ 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:

CLINT PERRYMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-348-
7-10-00 1948

CR2E034 (5/00)

attachment
Pg 7000161484
00086897

Previously
mailed out,
" Lost to mailing "
SYSTEM,
Please void
Previously
issued
check