

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90170 028 ***150.00

DOCUMENT # P97000105409

1. Entity Name
JIM HODAK CONSTRUCTION, INC.



Principal Place of Business
**36600 SUNDANCE DRIVE
GRAND ISLAND FL 32735**

Mailing Address
**36600 SUNDANCE DRIVE
GRAND ISLAND FL 32735**

2. Principal Place of Business
16445 Orange Ave
Suite, Apt. #, etc.

3. Mailing Address
16445 Orange Ave
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

**UMATILLA
EAST, FL**

City & State
UMATILLA, FL

4. FEI Number **59-3473456**

Applied For
Not Applicable

Zip
32784

Country
LAKE

Zip
32784

Country
LAKE

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

6. Name and Address of Current Registered Agent

**HODAK, JAMES F
36600 SUNDANCE DRIVE
GRAND ISLAND FL 32735**

7. Name and Address of New Registered Agent

Name **JAMES F. HODAK**
Street Address (P.O. Box Number is Not Acceptable)
16445 ORANGE AVENUE
City **UMATILLA** FL Zip Code **32784**

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 **4/7/03**

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

TITLE **P** ☐ Delete
NAME **HODAK, JAMES F**
STREET ADDRESS **36600 SUNDANCE DRIVE**
CITY-ST-ZIP **GRAND ISLAND FL 32735**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **JAMES F. HODAK** ☒ Change ☐ Addition
NAME **16445 ORANGE AVE**
STREET ADDRESS
CITY-ST-ZIP **UMATILLA, FL 32784**

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

TITLE ☐ Change ☐ Addition
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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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/03 **352-267-6344**
Date Daytime Phone #

CR2E034 (10/02)