

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P98000007154**

1. Entity Name  
**CITRUS CONSTRUCTION GROUP, INC**  
**1025 N PINE HILLS RD ORLANDO FL**  
**32808**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 MAY 20 AM 9:18

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**1025 N PINE HILL RD**

3. Mailing Address

Suite, Apt. #, etc.

**ORLANDO FL 32808**

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**593521150**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**ONCEIL FRANCIS**

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

**1025 N PINE HILL RD**

**ORLANDO FL 32818**

City

**FL**

Zip Code

**DO NOT WRITE  
IN THIS SPACE**

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

*Onceil Francis*

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) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PRESIDENT**  
**ONCEIL FRANCIS**  
**1025 N PINE HILL RD ORLANDO FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**000020255180**  
**05/29/03--01068--009 \*\*308.75**

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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Onceil Francis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

2022

I O'Neil Francis did not receive  
my 2002 or 2003 U.B.R for Citrus Construction  
Group INC.

O'Neil Francis