

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90007 031 ***150.00

DOCUMENT # P98000015632

1. Entity Name

PRO CONSTRUCTION SERVICES, INC.

Principal Place of Business

Mailing Address

255 Manor Drive, Suite #2 (SAME)
 Merritt Island, Florida 32952

2. Principal Place of Business
 Same as above

3. Mailing Address
 Same as above

Suite, Apt. #, etc.
 Same as above

Suite, Apt. #, etc.
 Same as above

City & State
 Same as above

City & State
 Same as above

Zip
 32952

Country
 USA

Zip
 32952

Country
 USA

4. FEI Number
 59-3496702

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

David S. Wilcox
 255 Manor Drive, Suite #2
 Merritt Island, Florida 32952

7. Name and Address of New Registered Agent

Name N/A
 Street Address (P.O. Box Number is Not Acceptable) N/A
 City N/A FL Zip N/A

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, 2000 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 President/Secretary/Treasurer ☐ Delete
 NAME Jill N. Wilcox
 STREET ADDRESS 1415 Mackerel Avenue
 CITY-ST-ZIP Merritt Island, Florida 32952

TITLE Vice-President ☐ Delete
 NAME David S. Wilcox
 STREET ADDRESS 1415 Mackerel Avenue
 CITY-ST-ZIP Merritt Island, Florida 32952

TITLE Vice-President ☐ Delete
 NAME James W. Sommers
 STREET ADDRESS 250 Sykes Creek Parkway Unit B-107
 CITY-ST-ZIP Merritt Island, Florida 32952

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 ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
 NAME
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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:

Jill N. Wilcox Jill N. Wilcox
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-20-00 321-453-6464

CR2E034 (9/99)