

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 13, 2001 8:00 am**  
**Secretary of State**

08-13-2001 90063 026 \*\*\*550.00

**DOCUMENT # P98000045970**

1. Entity Name

**YODER CONSTRUCTION SERVICES, INC.**

Principal Place of Business

12108 N 56 ST  
 STE F-2  
 TAMPA FL 33617  
 US

Mailing Address

12108 N 56TH ST  
 STE F-2  
 TAMPA FL 33617  
 US

2. Principal Place of Business

**5434-56TH COMMERCE PARK BLVD**  
 Suite, Apt. #, etc.

3. Mailing Address

**5434-56TH COMMERCE PARK BLVD**  
 Suite, Apt. #, etc.

City & State

**TAMPA, FL**

City & State

**TAMPA, FL**

Zip

**33610**

Country

**HILLSBOROUGH**

Zip

**33610**

Country

**HILLSBOROUGH**

6. Name and Address of Current Registered Agent

**YODER, JOHN D**  
**8402 RENALD BOULEVARD**  
**TEMPLE TERRACE FL 33637**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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, 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 ☐ Delete  
 NAME **DPT**  
 STREET ADDRESS **YODER, JOHN D**  
 CITY-ST-ZIP **8402 RENALD BOULEVARD**  
**TEMPLE TERRACE FL 33637**

TITLE ☐ Delete  
 NAME **VS**  
 STREET ADDRESS **YODER, TERRY L**  
 CITY-ST-ZIP **8402 RENALD BLVD**  
**TEMPLE TERRACE FL 33637**

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 ☐ 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

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:

**John D. Yoder** **JOHN D. YODER**

**08/07/01**  
 Date

**(813) 927-7240**  
 Daytime Phone #

CR2E034 (10/00)