

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Sep 06, 2000 8:00 am**
Secretary of State

09-06-2000 90094 041 ***558.75

DOCUMENT # P98000066127

1. Entity Name

ALMARK CONSTRUCTION, INC.

Principal Place of Business

1225 BENNETT DR.

#114

LONGWOOD FL 32750

Mailing Address

1225 BENNETT DR.

#114

LONGWOOD FL 32750

B0105034



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4185 W. LAKE MARY BLVD.

3. Mailing Address

SAME

Suite, Apt. #, etc.

SUITE # 101

Suite, Apt. #, etc.

City & State

LAKE MARY FL

City & State

Zip

32744

Country

SEMINOLE

Zip

Country

4. FEI Number

59-3522911

Applied For

Not Applicable

5. Certificate of Status Desired

☒**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PESTER, MARK**1225 BENNETT DR****#114****LONGWOOD FL 32750**

7. Name and Address of New Registered Agent

Name

MARK PESTER

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

4185 W. LAKE MARY BLVD. # 101

City

LAKE MARY**FL**

Zip Code

32744

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.

MARK PESTER PCEO

(NOTE: Registered Agent signature required when reinstating)

DATE

9/1/009. 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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PCFO	PESTER, MARK	317 BENNETT DR	SANFORD IL 32773	<input type="checkbox"/>

VPCO	GRONERT, ALBERT	755 OAKLAND CIR., #213	LAKE MARY FL 32746	<input checked="" type="checkbox"/>
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VPC	SANDERS, WALTER J	296 LESLIE LN	LAKE MARY FL 32746	<input checked="" type="checkbox"/>
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				<input type="checkbox"/>
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				<input type="checkbox"/>
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				<input type="checkbox"/>
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PCFO	PESTER, MARK	4185 W. LAKE MARY BLVD. #101	LAKE MARY, FL 32744	<input checked="" type="checkbox"/>	<input type="checkbox"/>

				<input type="checkbox"/>	<input type="checkbox"/>
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/00

Date

(407) 925-3900

Daytime Phone #

CR2E034 (5/00)