2001 UNIFORM BUSINESS REPORT (UBR)

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

ED OR PRINTED NAM

FILED May 11, 2001 8:00 am Secretary of State DOCUMENT # **P98000091760** BRINMAR CEMENT & STONEWORKS, INC. 05-11-2001 90002 031 ***150.00 Principal Place of Business Mailing Address 1605 MAIN ST. STE. 1001 1605 MAIN ST. STE. 1001 SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 3. Mailing Address rossing Ct Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0872137 Sarasota Not Applicable Čountry Country Zip \$8.75 Additional 5. Certificate of Status Desired 240 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Brian L. King Brian GOLDSMITH: STAINDEY 7306 Deer Crossing Ct. Sarasota, FL Street Address (P.O. Box Number is Not Acceptable) Deer Sarasota 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 uired when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPAT DPAST CR2E034 (10/00) Addition TITLE Delete TITLE KING, BRIAN L KING, BRIAN L. NAME NAME STREET ADDRESS 2607 INGRAM AVE. SOUTH STREET ADDRESS 7309 Deer Crossing Court CITY-ST-7IP CITY-ST-7IP SARASOTA FL 34232 Sarasota, FL 34240 VSAT Delete XX Change Addition TITLE TITLE DVPSAT KING, MARIA L NAME NAME KING, MARIA L. STREET ADDRESS 2607 INGRAM AVE. SOUTH STREET ADDRESS 7306 Deer Crossing Court CITY-ST-7IP CITY-ST-ZIP SARASOTA FL 34232 Sarasota, FL 34240 ☐ Change Delete Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-Z!P CITY-ST-ZIP Delete TITLE Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P 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