## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Jan 30, 2002 8:00 am Secretary of State P98000095165 DOCUMENT # 1. Entity Name 01-30-2002 90014 024 \*\*\*150.00 DIVCO CONSTRUCTION CORP. Principal Place of Business Mailing Address 1998 TRADE CENTER WAY 1998 TRADE CENTER WAY NAPLES FL 34109 NAPLES FL 34109 2. Principal Place of Business 3. Mailing Address 5628 Willow 6628 Willow Book Ar DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3559612 Not Applicable Zip Country Zip Country \$8.75 Additional .5.\_Certificate of Status Desired . 🗀 🔞 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KAUFFMAN, STEPHEN O. Box Number is Not Acceptable) 1998 TRADE CENTER WAY NAPLES FL 34109 City cples 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 name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CEO CR2E034 (9/01) TITLE Delete TITLE STEPHEN KAUFFMAN KAUFFMAN, STEPHEN NAME NAME 6628 Willow Perk Drive STREET ADDRESS 1998 TRADE CENTER WAY STREET ADDRESS CITY-ST-ZIP NAPLES FL 34109 CITY-ST-ZIP reple , FL Z Delete President TITLE TITLE Mork Ensta NAME NAME Eastman, Mark -6619 Willow Peak Or STREET ADDRESS STREET ADDRESS 1998 TRADE CENTER WAY -CITY-ST-ZIP NAPLES FL 34109/-> CITY-ST-ZIP. Noples FL 34405 TITLE TITLE 5= < Change ☐ Addition Delete SEC NAME NAME STEPHEN Kertman 6628 Willow Pork Dr KAUTTMAN, STEPHEN STREET ADDRESS STREET ADDRESS 1998 TRADE CENTER WAY CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34109 ☐ Change ☐ Addition TITLE TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

FILED