

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000095367

1. Entity Name

C. WRIGHT BACKHOE RENTAL, INC.

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90071 026 ***158.75

Principal Place of Business

3131 SW MARTIN DOWNS BLVD., SUITE 312
PALM CITY FL 34990

Mailing Address

3131 SW MARTIN DOWNS BLVD., SUITE 312
PALM CITY FL 34990-2642

2. Principal Place of Business

3. Mailing Address

6283 SW 39 St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm City FL

Zip

Country

34990

Country

Martin

4. FEI Number

65-0881968

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, LINDA

3131 SW MARTIN DOWNS BLVD., SUITE 312
PALM CITY FL 34990

Name

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

6283 SW 39 St

City

Palm City

FL

34990

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 date 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRIGHT, CHRISTOPHER		NAME		
STREET ADDRESS	3131 SW MARTIN DOWNS BLVD. # 312		STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL 34990		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRIGHT, LINDA		NAME		
STREET ADDRESS	3131 SW MARTIN DOWNS BLVD. # 312		STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL 34990		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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CITY-ST-ZIP			CITY-ST-ZIP		
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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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/21/00 954
970-3582

CR2E034 (9/99)