OOCUME	NT #	P980	001	07071	

1. Entity Name

BIG RED FENCING INC.

Principal Place of Business

Mailing Address

2717 11TH AVE. W. BRADENTON FL 34205 2717 11TH AVE. W.

BRADENTON FL 34205

5/4" 12 TH ANSWER West	5.14 TH 12 TH AVENUE WEST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Palmetto FL	Palmetto, FL

oute, Apt.	π, οιο.				DO NOT WAITE IN THIS SPACE							
Palme	1 [20 17]		City & State	FL		4. F	El Number	55-0884077			plied For t Applicable	
3422	, 70	ountry ANATE	34221	Countr	intec	5. (5. Certificate of Status Desired			€ 9.75 Additional		
		Address of Current	Registered Agent			7. N	iame and Add	ress of New Re	gistered Ag	ent		
ALLEN, PA						·	G. A	<u> </u>	······································			
2717 11TH AVE. W.				F	Street Address (P.O. Box Number is Not Acceptable)							
PALMETTO FL 34221					Cirpalmetto FL Zincora21							
8. The above	named entity sut	mits this statement for	the purpose of changing is	registered	d office or	registered ag	ent, or both, in	the State of Flor	ida.			
SIGNATURE .	Signature, typed or prin	led name of registered agent a	and title if applicable. (NOT	E: Registered	Agent signati	ure required when re	FEB instating)	19, 2	002 DATE			
Tax filing r	pration is eligible t requirement and e ria on back)	o satisfy its Intangible elects to do so.	FILE NOW! After May 1, 20 Make Check Payab	02 Fee w	ill be \$5	50.00		Campaign Fina and Contribution			May Be to Fees	
11.		OFFICERS AND	DIRECTORS	12.		AD	DITIONS/CHA	NGES TO OFFIC			S IN 11	
. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Allen, Patrio 2717 11TH AV Palmetto Fl	e. West	☐ Delete	TITLE NAME STREET CITY-S	r address	S14 12TH	G. Aller Avenue 1 FL, 342	uest)	Change	Addition (
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET CITY-S	r address St-zip	VP Ge0₽4€ 6904 CO		20+290	[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP	ASS-VI	R. STOKE WAVENUE	west	• (Change	₹ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP					☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP				(☐ Change	☐ Addition	

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 of 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 ampowered.