

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90068 050 ***150.00

DOCUMENT # P99000003394

1. Entity Name
TYRRELL CONSTRUCTION, INC.



Principal Place of Business
**5246 SE ORANGE ST
STUART FL 34997-3445**

Mailing Address
**5246 SE ORANGE ST
STUART FL 34997-3445**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

Zip

Country

Zip

Country

4. FEI Number **65-0890906**

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

**DUNGEY, RICHARD J
1100 S. FEDERAL HWY.
STUART FL 34994**

Name **LOUIS E. LOZEAU, JR**

Street Address (P.O. Box Number is Not Acceptable)
1000 SE MONTEREY COMMONS BLVD

SUITE 208

City **STUART**

FL

Zip Code **34994**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **LOUIS E. LOZEAU, Jr. 1/8/03**

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **TYRRELL, COLIN W**
STREET ADDRESS **3401 COURT DR**
CITY-ST-ZIP **STUART FL 34994**

TITLE **S** ☐ Change ☒ Addition
NAME **WILLIAM A TYRRELL**
STREET ADDRESS **5246 SE ORANGE ST.**
CITY-ST-ZIP **STUART, FL 34997-2445**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **WILLIAM A. TYRRELL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/03

Date

772 223-1681

Daytime Phone #

CR2E034 (10/02)