

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 91046 004 ***150.00

DOCUMENT # *P99000005472*

1. Entity Name

APACHE CONSTRUCTION, INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

801 LAKE SEBRING DR

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SEBRING, FLORIDA

City & State

FLORIDA

4. FEI Number

59-313 8916

Applied For

Not Applicable

Zip

33870

Country

USA

Zip

33870

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

MICHAEL M. DISLER

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

329 S. COMMERCE AV.

City

SEBRING

FL

Zip Code

33870

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

*PRESIDENT & SEC/TREAS.
MICHAEL M. DISLER
329 S COMMERCE AVE
SEBRING, FL 33870*

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

*V. P
MICHAEL D. SECOR
801 LAKE SEBRING DR.
SEBRING, FL 33870*

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mike Secor V.P. MIKE SECOR V.P. 4/3/03 863-385-5786

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)