

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 22, 2001 8:00 am
Secretary of State
 02-08-2001 90373 035 ***150.00

DOCUMENT # P99000005980

1. Entity Name

EAST COAST PRESSURE GROUTING, INC.

Principal Place of Business

775 TOMPKINS STREET
 MELBOURNE FL 32935

Mailing Address

775 TOMPKINS STREET
 MELBOURNE FL 32935

2. Principal Place of Business

East Coast Pressure Grouting, Inc.

Suite, Apt. #, etc.

775 Tompkins St.

City & State

Melbourne Fl.

Zip

32935

Country

Brevard

3. Mailing Address

East Coast Pressure Grouting, Inc.

Suite, Apt. #, etc.

775 Tompkins St.

City & State

Melbourne Fl.

Zip

32935

Country

Brevard



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3560943**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WOODBURY, JAMES
 775 TOMPKINS STREET
 MELBOURNE FL 32935

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 title 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, 2001 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

TITLE	P	<input type="checkbox"/> Delete
NAME	WOODBURY, JAMES	
STREET ADDRESS	775 TOMPKINS STREET	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	VPT	<input type="checkbox"/> Delete
NAME	WOODBURY, CHERYL	
STREET ADDRESS	775 TOMPKINS STREET	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

Cheryl Woodbury Cheryl Woodbury 2-05-01 (321-259-0493)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (10/00)