

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90195 011 ***150.00

DOCUMENT # P99000012154

1. Entity Name
BOYD EARTHWORK, INC.



Principal Place of Business
RT. 2, BOX 1110
BRYCEVILLE FL 32009

Mailing Address
RT. 2, BOX 1110
BRYCEVILLE FL 32009

2. Principal Place of Business

3. Mailing Address

11539 Blackwater Pl

11539 Blackwater Pl

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bryceville FL

City & State

Bryceville FL

Zip

32009

Country

USA

Zip

32009

Country

USA

4. FEI Number **59-3555732**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BOYD, BAILEY C
RT 2 BOX 1110
BRYCEVILLE FL 32009

7. Name and Address of New Registered Agent

Name

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

11539 Blackwater Place

City

Bryceville

FL

Zip Code

32009

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

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

TITLE **DVS** ☐ Delete
NAME **BOYD, DORIS E**
STREET ADDRESS **RT. 2, BOX 1110**
CITY-ST-ZIP **BRYCEVILLE FL 32009**

TITLE **DPT** ☐ Delete
NAME **BOYD, BAILEY C**
STREET ADDRESS **RT 2 BOX 1110**
CITY-ST-ZIP **BRYCEVILLE FL 32009**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **11539 Blackwater Place**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **11539 Blackwater Place**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Doris E. Boyd 3-5-03 (904) 879-6751

Date

Daytime Phone #

CR2E034 (10/02)