

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000016446

1. Entity Name

DUGAN CONSTRUCTION, INC.

P

**FILED**  
**Jul 17, 2000 8:00 am**  
**Secretary of State**

07-17-2000 90006 009 \*\*\*150.00

Principal Place of Business

929 1/2 23 STREET W  
BRADENTON FL 34205

Mailing Address

929 1/2 23 STREET W  
BRADENTON FL 34205

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0250435

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

DUGAN, TROY

929 1/2 23 STREET W  
BRADENTON FL 34205

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
DUGAN, TROY  
2211 AVE C  
BRADENTON BEACH FL 34217 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/00

Date

941-748-4975

Daytime Phone #

CR2000-11/00



**DUGAN CONSTRUCTION**  
RESIDENTIAL • COMMERCIAL

Attachment  
D#P99000016446  
0007032-1

**TROY A. DUGAN**  
CB C049060

July 10, 2000

Division of Corporations  
Uniform Business Report filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

A few weeks ago it was brought to my attention that we should have received a renewal notice from the State.

I spoke with a Robert in your department to see what I needed to do. He explained that the original forms were mailed in January and the second mailings would be soon. He also explained that I could send in the original amount of \$150 with the second mailing.

Per the instruction from Robert, here is our check for \$150 for the renewal. Thank you for any consideration you can extend. Now that we know notices are mailed in January, we'll know to call sooner if the notice is not received.

Thank you,

Laura M. Moden  
Office Manager