## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P99000017445

522 SADDLE RD.

ROCKWOOD, PA 15501 US

Address:

City-St-Zip:

Entity Name: CONSTRUCTION SOLUTIONS & SERVICES, INC.

FILED Apr 27, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 654 WELLS LANDING DRIVE ORANGE PARK, FL 32073 **Current Mailing Address: New Mailing Address:** 654 WELLS LANDING DRIVE ORANGE PARK, FL 32073 FEI Number: 59-3607912 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DARRELL, LISA M PRES. 654 WELL'S LANDING DRIVE ORANGE PARK, FL 32073 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition DARRELL, LISA M Name: Name: 654 WELLS LANDING DRIVE Address: Address: City-St-Zip: ORANGE PARK, FL 32073 US City-St-Zip: VD (X) Delete Title: Title: () Change () Addition Name: FAIN, DAMIAN E Name: 264 EAST CHURCH STREET Address: Address: SOMERSET, PA 15501 US City-St-Zip: City-St-Zip: Title: Title: TD () Delete () Change () Addition MARTIN, TONY S Name: Name: 264 E. CHURCH STREET Address: Address: City-St-Zip: SOMERSET, PA 15501 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition MARTIN, GEORGIA R Name: Name: Address: 264 EAST CHURCH ST. Address: City-St-Zip: SOMERSET, PA 15501 US City-St-Zip: Title: Title: () Delete () Change () Addition MARTIN, JAMES O III Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: LISA MARIA DARRELL P 04/27/2003