

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000023849

1. Entity Name

ALL PRO CONTRACTING, INC.

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90082 012 ***150.00

Principal Place of Business

Mailing Address

1756 UNIVERSITY BLVD S
JACKSONVILLE FL 32216

~~1756 UNIVERSITY BLVD S~~
~~JACKSONVILLE FL 32216 8829~~

2. Principal Place of Business

3. Mailing Address

PO Box 48070

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Jax FL

Zip

Country

Zip

Country

32247

USA

4. FEI Number

52-2154634

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

FRIEDLINE, RODGER J ESQ
ATTORNEY AT LAW
1756 UNIVERSITY BLVD S
JACKSONVILLE FL 32216

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	DEAN, LARRY JR.	4811 ATLANTIC BLVD., #4	JACKSONVILLE FL 32207	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
D, P	Dean, Larry Jr	1756 Univ Blvd. S.	Jax FL 32216	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D, S.	Streep, Frank	1756 Univ Blvd. S.	Jax FL 32216	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP	Connors Shawn	1756 Univ Blvd. S.	Jax FL 32216	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 filers empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

4/5/00

904346-5411

CR2E034 (9/99)