

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000029016

FILED  
Apr 14, 2003  
Secretary of State

Entity Name: STRUCTURAL SYSTEMS 2000, INC.

## Current Principal Place of Business:

1725 OAKHURST AVE  
JACKSONVILLE, FL 32208

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 40886  
JACKSONVILLE, FL 32203

## New Mailing Address:

FEI Number: 59-3569413

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GRAHAM, MARION PD  
P.O. BOX 43186  
JACKSONVILLE, FL 32203 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: GRAHAM, MARION  
Address: PO BOX 43186  
City-St-Zip: JACKSONVILLE, FL 32203

Title: D ( ) Delete  
Name: PICKELL, MORRIS  
Address: 1610 HAWKS NEST DRIVE  
City-St-Zip: ORANGE PARK, FL 32073

Title: D ( ) Delete  
Name: CARTER, TERRY  
Address: 6518 TOBACCO DR  
City-St-Zip: APOLLO BEACH, FL 33572

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: MARION GRAHAM

P

04/14/2003

Electronic Signature of Signing Officer or Director

Date