

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000036914

1. Entity Name

S.D. & SONS CONCRETE PUMPING INC.

FILED

00 JUN -8 PM 12:00

Principal Place of Business

501 N. ORLANDO AVE.
313-112

Mailing Address

501 N. ORLANDO AVE.
313-112

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WINTER PARK, FL 32789

WINTER PARK, FL 32789

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

59-3574871

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DEBRA MEADOWS
501 N. ORLANDO AVE.
#313-112
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

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

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☒ Addition

DP
SAMUEL SWEET
413 N. 5TH STREET
HAINES CITY, FL 33844

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☒ Addition

D
HENRY THOMPSON
312 AVE. U NE
WINTER HAVEN, FL 33881

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☒ Addition

DT
DEBRA MEADOWS
501 N. ORLANDO AVE. #313-112
WINTER PARK, FL 32789

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

600003291636--7
-06/15/00--01083--005

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

****158.75 ****158.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

SP

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:

Debra Meadows

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/2/2000

Date

(407)234-3181

Daytime Phone #