

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000038104

1. Entity Name

SOUTHERN SUN CONSTRUCTION, INC.

FILED

Mar 08, 2000 8:00 am
Secretary of State

03-08-2000 90049 011 ***150.00

Principal Place of Business

Mailing Address

713-49TH STREET
BRADENTON FL 34208

713-49TH STREET
BRADENTON FL 34208-5843

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

65-0913460

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

BLALOCK, LANDERS, WALTERS & VOGLER, P.A.
802-11TH STREET WEST
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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<input type="checkbox"/> Delete				P	PRESIDENT		
					RICHARD D. CASPER, II		
					713 49TH STREET EAST		
					BRADENTON, FLORIDA 34208		
<input type="checkbox"/> Delete				T/S	T/S		
					LISA A. CASPER		
					713 49TH STREET EAST		
					BRADENTON, FLORIDA 34208		
<input type="checkbox"/> Delete				V	V		
					DOUGLAS A. KELBY		
					36344 HAMMER		
					LEVONIA, MICHIGAN 48152		
<input type="checkbox"/> Delete							
<input type="checkbox"/> Delete							
<input type="checkbox"/> Delete							

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:

LISA A. CASPER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/00

Date

941-750-0375

Daytime Phone #

CR2E034 (9/99)