

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 01, 2001 8:00 am**  
**Secretary of State**

06-01-2001 90002 040 \*\*\*150.00

**DOCUMENT # P99000068978**

1. Entity Name  
**DOUBLE TT BUILDERS, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**104 THRUSH AVE.  
 SEBRING FL 33872**

Mailing Address  
**104 THRUSH AVE.  
 SEBRING FL 33872**

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 **65-0952335**

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

**STATLER, PHILLIP W  
 1119 US 27 SOUTH  
 SEBRING FL 33870-2171**

Name

Street Address (P.O. Box Number is Not Acceptable)

**3531 U.S. Hwy 27 South**

City

**Sebring**

**FL**

Zip Code

**33870**

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.

(NOT) 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!**  
**After MAY 1, 2001 Fee IS \$150.00**  
**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 **D** ☐ Delete  
 NAME **GREEN, MARK A**  
 STREET ADDRESS **104 THRUSH AVE.**  
 CITY-ST-ZIP **SEBRING FL 33872**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D** ☐ Delete  
 NAME **GREEN, DIANE L**  
 STREET ADDRESS **104 THRUSH AVE.**  
 CITY-ST-ZIP **SEBRING FL 33872**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

*Mark A Green*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachments

Mark Green  
Double TT Builders  
104 Thrush Ave.  
Lehring, Fl. 33872

Dear Sir,

#P99000068978

772211

We did not receive this notice in time to make  
the May 1st deadline. Enclosed is a check for \$150.00  
originally due.

Thank you,

Mark Green

MARK GREEN

Double TT Builders