

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90139 049 ***150.00

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DOCUMENT # P99000074570

1. Entity Name
B & T FENCING, INC.



Principal Place of Business
**5201 NEW HOPE CHURCH STREET
TALLAHASSEE FL 32310**

Mailing Address
**5201 NEW HOPE CHURCH STREET
TALLAHASSEE FL 32310**

11016101



2. Principal Place of Business
5201 NEW HOPE CHURCH ROAD
Suite, Apt. #, etc.

3. Mailing Address
5201 NEW HOPE CHURCH ROAD
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
TALLAHASSEE, FL
Zip
32305
Country

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TALLAHASSEE, FL
Zip
32305
Country

4. FEI Number
59-3593447

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**TURK, MATT
2018 GARDENSBROOK LN
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name
RYAN BOYETT
Street Address (P.O. Box Number is Not Acceptable)
5201 NEW HOPE CHURCH ROAD
City
TALLAHASSEE FL Zip Code
32305

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **X** **RYAN E. BOYETT** **4/22/03**
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D TURK, MATTHEW I 5201 NEW HOPE CHURCH STREET TALLAHASSEE FL 32310 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BOYETT, RYAN E 5201 NEW HOPE CHURCH STREET TALLAHASSEE FL 32310 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **X** **SIGNATURE REQUIRED RYAN E. BOYETT** **4/22/03** **(850) 942-1003**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)