

2000 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
Jun 23, 2000 8:00 am
Secretary of State

05-31-2000 90022 040 ***150.00

DOCUMENT # **P990000774.19**
1. Entity Name
Burnett's General Contracting, Inc.
Principal Place of Business
**2512 Andalusia Blvd.
Cape Coral, Fla. 33909**
Mailing Address
**152 S.E. 19 Terr.
Cape Coral, FL 33990**

2. Principal Place of Business
**2512 Andalusia Blvd.
Suite, Apt. #, etc.**
City & State
Cape Coral, Fla.
Zip
33909
Country
LEE
3. Mailing Address
**152 S.E. 19 Terr.
Suite, Apt. #, etc.**
City & State
Cape Coral, Fla.
Zip
33990
Country
LEE

DO NOT WRITE IN THIS SPACE

4. FEI Number **05-0946091** Applied For
☒ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent
**Harrie Burnett
152 S.E. 19 Terr.
Cape Coral, FL 33990**
7. Name and Address of New Registered Agent
**Harrie Burnett
152 S.E. 19 Terr.
Cape Coral, FL 33990**
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 **Harrie Burnett**
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)
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
	President	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	Glenn Burnett	152 S.E. 19 Terrace Cape Coral, Fla 33990			
	Vice President	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	Harrie Burnett	152 S.E. 19 Terrace Cape Coral, Fla 33990			
	Director	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	Aron Almquist	105 Victoria Dr Cape Coral, Fla 33904			
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Glenn Burnett**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date **5-9-00** Daytime Phone # **941 458-0337**

CR2E034 (9/99)