## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## P99000078106 **DOCUMENT #**

1. Entity Name

SIGNATURE:

ALBENATE CONSTRUCTION CO., INC.



## FILED Apr 14, 2003 8:00 am Secretary of State 04-14-2003 90010 023 \*\*\*150.00

Principal Place of Business 1316 RORDAN AVE. NAPLES FL 34103		Mailing Address 1316 RORDAN AVE. NAPLES FL 34103	1316 RORDAN AVE.					
2. Principal Place of Business		3. Mailing Address	3. Mailing Address			\$111 <b>60</b> 111 10 <b>00</b> 1 1 <b>210</b> 1 11 <b>2</b> 11	DOME DAKE TOOL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 65-0925638		pplied For ot Applicable	
Zip	Country.	- Zip	Country .	5.	. Certificate of Status Desired	S8.75 Ad Fee Require		
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
SCHELLING, JEFFREY S 800 SEAGATE DRIVE, #304			Name Street	Name Street Address (P.O. Box Number is Not Acceptable)				
NAPLES F								
NAPLES FI	L 34103		City		A MARKET TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL TH	FL Zip Coo	de	
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								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550 Payable to Florida Departmen				9. Election Campaign Finar Trust Fund Contribution.	Adde	00 May Be d to Fees	
10.	OFFICERS A	AND DIRECTORS	11.	, ^	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 11	
STREET ADDRESS	P CHRISTOPHER, STALL H 1316 RIORDAN AVENUE NAPLES FL 34103	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition   6	
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indicated of the cor	ertify that the information supplied on this report or supplemental rep poration or the receiver or trustee of or on an attachment with an addre	ort is true and accurate and that empowered to execute this repor	my signature shall t as required by Ch	have the same	e legal effect as if made under oat	h; that I am an officer	or director	