

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2000 8:00 am
Secretary of State

07-17-2000 90006 005 ***150.00

DOCUMENT # P99000087061

1. Entity Name
A-1 DEMOLITION, INC.

R

Principal Place of Business Mailing Address
1515 WALDRUP RD. **1515 WALDRUP RD.**
LAKELAND FL 33809 **LAKELAND FL 33809**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
1515 Waldrup Road **1515 Waldrup Road**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
Lakeland, Florida **Lakeland, Florida**
 Zip Country Zip Country
33810-0231 **USA** **33810-0231** **USA**

4. FEI Number Applied For
59-3600610 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MYERS, PHILLIP S
1515 WALDRUP RD.
LAKELAND FL 33809

7. Name and Address of New Registered Agent
 Name **Phillip S. Myers**
 Street Address (P.O. Box Number is Not Acceptable)
1515 Waldrup Road
 City **Lakeland** **FL** Zip Code **33810**

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 *Phillip Myers* **PHILLIPS, MYERS, PRESIDENT**

07-10-00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete MYERS, PHILLIP S 1515 WALDRUP RD. LAKELAND FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete MYERS, JAMES T 3171 VALLEY VISTA CIR. LAKELAND FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Phillip S. Myers 1515 Waldrup Road Lakeland, Florida 33810-0231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition James T. Myers 5115 N. Socrum Loop Road #316 Lakeland, Florida 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Jacquelyn M. Myers 1515 Waldrup Road Lakeland, Florida 33810-0231
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (5/00)

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: *Phillip Myers* **PHILLIPS, MYERS, PRESIDENT** **07-10-00** **(803) 816-2848**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment
Off # pag 00087061
DUJ 70325

A-1 DEMOLITION, INC.
ATTN: JACKIE
1515 WALDRUP ROAD
LAKE LAND, FL 338100231

Request taken by: lyarbrough
06-23-2000

The forms you recently requested from this office are:

- (1) 201. COR Profit A/R

Should you have any questions or need any further information,
please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

To whom it may concern:

A-1 Demolition, Inc. never received the 1st notice of renewal in January. We are a new business and did not know to expect it, therefore, it was not missed until brought to my attention by my CPA. I called the Division of Corp. and the zip code on file was incorrect. The gentleman I spoke to said the late fee would be waived. I have enclosed a check for \$150.00 and made all necessary changes on the UBR.

J. Myers,
SECRETARY, TREAS.