

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2002 8:00 am**  
**Secretary of State**

02-21-2002 90044 035 \*\*\*150.00

0502901 AV

**DOCUMENT # P99000096776**

1. Entity Name

**T.R. RUSHING CONSTRUCTION, INC.**

Principal Place of Business

~~3059 ESTEY AVENUE~~  
**NAPLES FL 34104**

Mailing Address

**3059 ESTEY AVENUE**  
**NAPLES FL 34104**

2. Principal Place of Business

**200 PALMETTO DUNES CIR**

3. Mailing Address

**200 PALMETTO DUNES CIR**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**NAPLES, FLORIDA**

City & State

**NAPLES, FLORIDA**

Zip

**34113**

Country

Zip

**34113**

Country

4. FEI Number

**65-0957046**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**RUSHING, TIM R**

~~3059 ESTEY AVENUE~~ **200 PALMETTO DUNES CIR**  
**NAPLES FL 34104**  
**34113**

Name

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

**200 Palmetto Dunes Circle**

City

**FL**

Zip Code

**34113**

7. Name and Address of New Registered Agent

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

**- TIMOTHY R. RUSHING**

**1/31/02**

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 \$150.00**  
**After May 1, 2002 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

TITLE **PTSD** ☐ Delete  
NAME **RUSHING, TIM R**  
STREET ADDRESS ~~3059 ESTEY AVENUE~~ **200 PALMETTO DUNES CIR**  
CITY-ST-ZIP **NAPLES FL 34104 34113**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME **200 Palmetto Dunes Circle**  
STREET ADDRESS **NAPLES, FL 34113**  
CITY-ST-ZIP

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

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

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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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/31/02**

Date

**941-213-**

Daytime Phone #

CR2E034 (9/01)