

2000 UNIFORM BUSINESS REPORT (UBR)

pg 192

01/6/91

DOCUMENT # P99000107351

1. Entity Name
BARKER CONTRACTING, INC.

FILED

00 JUL 24 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
670 NORTH THORPE AVENUE
ORANGE CITY FL 32763

Mailing Address
670 NORTH THORPE AVENUE
ORANGE CITY FL 32763

2. Principal Place of Business

3. Mailing Address
P.O. Box 740518

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Orange City, FL

4. FEI Number

59-3636848

Applied For

Not Applicable

Zip

Country

Zip

Country

3274-0518 Volusia

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARKER, GEORGE B
670 NORTH THORPE AVENUE
ORANGE CITY FL 32763

Name

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

City

500003358085--8

-08/15/00-01070-014

*****8.75 *****8.75

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
PRES.
George B. Barker
670 N. Thorpe ave
Orange City FL 32763

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
V.P.
Karen T. Barker
422 W. Howard ave
Orange City FL 32763

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
Sec.
George B. Barker
670 N. Thorpe ave
Orange City FL 32763

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
PRES.
George B. Barker
670 N. Thorpe ave
Orange City, FL 32763

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
500003358085--8
-08/15/00-01070-013
****150.00 ****150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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:

George B. Barker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

PG 2 of 2

TO: (U B R)

7-20-00

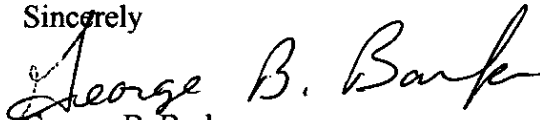
FROM: BARKER CONTRACTING, INC.

I am sending my U B R with this letter asking you to waive the \$ 550.00 fee and except the original \$ 150.00.

At the time I received the U B R 2000 I started to work for another company that included me to work out of state for over two months and was unable to file in time . I am filing now with the original \$ 150.00 . Please let me know if this is acceptable. I can be reached at (904) 775-4892.

My address is 670 N. Thorpe ave. Orange city, fl. 32763

Sincerely



George B. Barker

BARKER CONTRACTIG, INC.