

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90010 025 ***150.00

DOCUMENT # P99000107887

1. Entity Name

INTEGRITY MARINE CONSTRUCTION, INC.

Principal Place of Business

~~1621 SOUTHWIND DRIVE~~
~~BRANDON FL 33510~~
2130 Woodberry Rd
Brandon, FL 33510

Mailing Address

~~1621 SOUTHWIND DRIVE~~ **2130 Woodberry Rd**
BRANDON FL 33510



2. Principal Place of Business

2130 Woodberry Rd

Suite, Apt. #, etc.

3. Mailing Address

2130 Woodberry Rd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Brandon, FL

City & State

Brandon, FL

4. FEI Number

59-3615856

Applied For

Not Applicable

Zip

33510

Country

USA

Zip

33510

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JACOBS, JAMES W
~~1621 SOUTHWIND DR.~~
BRANDON FL 33510

7. Name and Address of New Registered Agent

Name

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

2130 Woodberry Rd

City

Brandon

FL

Zip Code

33510

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 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 **PD** ☐ Delete
NAME **JACOBS, JAMES W**
STREET ADDRESS ~~1621 SOUTHWIND DR~~ **2130 Woodberry Rd**
CITY-ST-ZIP **BRANDON FL 33510**

TITLE **V** ☐ Delete
NAME **JACOBS, SUZANNE M**
STREET ADDRESS ~~1621 SOUTHWIND DR~~ **2130 Woodberry Rd**
CITY-ST-ZIP **BRANDON FL 33510**

TITLE **S** ☐ Delete
NAME **MAYEUX, KEVIN M**
STREET ADDRESS **4845 OSSINGTON COURT** **4842 Sheehan Place**
CITY-ST-ZIP **INDIANAPOLIS IN 46254**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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

01/10/02

927 2558

Date

Daytime Phone #

CR2E034 (9/01)