AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

				· /						
DOCUMENT # 502382 1. Entity Name John L. Bruce Construction Company, Inc.						SECRETARY OF STATE PEVISION OF CORPORATIONS OI JUL 17 PM 12: 24				
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Principal Place of Business Mailing Address							:			
1680 Avion Place							1			
Napies,	Florida 34104	,								
		•					1			
2. Principal P	Place of Business	3. Mailing Address			\neg					
***						•				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE	IN THIS SI	PACE		
City & Stat	R	City & State				4. FEI Number	!		upplied For	٦
0.1, 0.0.1	•	on, a one				65-0216259	:	<u> </u>	lot Applicable	3
Zip	Country	Zip	Coun	try	一	5. Certificate of Status Desired	\$	8.75 Ac	ditional	7
			<u> </u>			· · · · · · · · · · · · · · · · · · ·	F	ee Requir	eci	_
	6. Name and Address of Current R	legistered Agent		Name		7. Name and Address of New Re	gistered A	gent		-
John L.]			_
	on Place			Street Addre	988 (P.	O. Box Number is Not Acceptable)	İ			
wapies,	Florida 34104						!			1
				City				Zip Co		4
				City			<u>,</u> FL	Zip Co		
Tax filing r	Signature, typed or printed name of registered agent are praction is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW	/!!! FEE 001 Fee	will be \$550.0	00	10. Election Campaign Final Trust Fund Contribution.	,	Adde	00 May Be	
11.	OFFICERS AND E	DIRECTORS	12.			ADDITIONS/CHANGES TO OFFIC]_
TITLE	Presidentano,	. Delete	TITL			President/Secretary L. Bruce	ý/Dir	Change	Addition	8
NAME STREET ADDRESS	John L. Bruce		NAM Stre		-	Avion Place				1
CITY-ST-ZIP	1680 Avion Place Naples, Florida 3410	۸,		110		s, Florida 34104				18
MILE	Vice President	▼ Delete	ווד		<u> </u>			☐ Change	Addition	CR2E034 (11/00)
NAME	Kathi L. Bruce		NAM	• . J		800004	aga	l 🔾 1 !		از
STREET ADDRESS CITY-ST-ZIP	1680 Avion Place			ET ADORESS - St-ZTP		800004 -07/24	/0Ĭ	ວໄດອ໌ຣີ	 016 ~	"
	Naples, Florida 3410		<u> </u>		2001	dent/Treasurer/Dir	C1-051	Wat A	**61.25	-
TITLE NAME		☐ Delete	TITLE NAM			Fletcher	ector i	Unange	X Addition	
STREET ADDRESS			STRE	etadoress [50	00 1	.08th Avenue NE, Su		50		
CITY-ST-ZIP		·	CITY	-sī-ær Be	≥11€	vue, Washington 980	004			
TITLE		☐ Detete	TITL	•				Change	☐ Addition	
NAME STREET ADDRESS			NAM	E Et adoress						
CITY-ST-ZIP				-SI-ZIP						
TITLE		☐ Delete	TITLE					☐ Change	Addition	1
NAME			NAM	E			\			
STREET ADDRESS			il.	ET ADDRESS		į	hal	ΔO		
CITY-ST-ZIP				-ST-ZIP			$\mathcal{H}_{l,l}$	1000		4
TITLE NAME		☐ Delete	TITLE	1			p	□\ Change	Addition	
STREET ADDRESS			NAM! STRE	ET ADIORESS			1			
CITY-ST-ZIP				-ST-ZIP						
13. hereby o	certify that the information supplied with t	this filing does not qualify f	or the exe	mption stated in	n Sec	tion 119.07(3)(i), Florida Statutes. I fi	urther certif	y that the	information	1
indicated of the cor changed,	on this report or supplemental report is in poration or the receiver or susteen empoy or on an attachment with an attachment with an attachment with an attachment.	true and accurate and that vered to execute this report in all other like empowered	my signal t as requir d.	ture shall have t red by Chapter	the se 607.	me legal effect as if made under oa Florida Statutes; and that my name a	th; that I am appears in I	n an office Block 11 o	r or director or Block 12 if	
SIGNAT	URE: SIGNATURE AND THED OF OR	INTED NAME OF SIGNING OFFICE	R OR DIRECT	John	<u>L.</u>	Bruce ///oi	941)7	732-5	884	