

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S77417

1. Entity Name  
**ALLIED CONSTRUCTION, INC.**



Principal Place of Business  
3818 DEL PRADO BLVD  
CAPE CORAL, FL 33904 US

Mailing Address  
3818 DEL PRADO BLVD  
CAPE CORAL, FL 33904 US

FILED  
03 AUG -8 PM 1:27

AMENDED  
TALLAHASSEE, FLORIDA



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
**65-0289937**

Applied For  
☐ Not Applicable

Zip

Country

Zip

Country

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

DRISCOLL, EDWARD  
4333 AGUALINDA BLVD.  
CAPE CORAL, FL 33914

Name

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

City

**FL**

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee is \$110.00 + \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
ST  
DRISCOLL, SUSAN  
STREET ADDRESS  
4333 AGUALINDA BLVD.  
CITY-ST-ZIP  
CAPE CORAL, FL 33914 ☐ Delete

TITLE  
NAME  
President  
Driscoll, Susan  
STREET ADDRESS  
2831 SW 43rd Street  
CITY-ST-ZIP  
Cape Coral, FL 33914 ☒ Change ☐ Addition

TITLE  
NAME  
P  
DRISCOLL, EDWARD  
STREET ADDRESS  
4333 AGUALINDA BLVD.  
CITY-ST-ZIP  
CAPE CORAL, FL 33914 ☐ Delete

TITLE  
NAME  
Treasurer  
Driscoll, Edward  
STREET ADDRESS  
2831 SW 43rd Street, Cape Coral, FL 33914 ☒ Change ☐ Addition

TITLE  
NAME  
  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
Vice President  
Collins, Lance  
STREET ADDRESS  
2814 SW 47th Terrace  
CITY-ST-ZIP  
Cape Coral, FL 33914 ☐ Change ☒ Addition

TITLE  
NAME  
  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Susan Driscoll* SUSAN DRISCOLL

7-16-03

(239) 540-0008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)