2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # \$83178

1. Entity Name

 \equiv

FILED Jan 18, 2000 8:00 am Secretary of State

BROWNELL CONSTRUCTION COMPANY, INC.							01-18-2000 90106 009 ***150.00					
Principal Plac	e of Busines	······································	Mailing Address			_						
1209 TECH BLV SUITE 203 TAMPA FL 3361 US	VD.		P O BOX 1363 BRANDON FL 33509-1363 US				1 1 0.0 11 0.10 F D 1 1	0142 HIBI (1811 I 88	81 1821 BIBIT BI	del genie denie bid	11(8/8// (82)	
2. Principal Place of Business			3. Mailing Address			_						
Suite, Apt. #, etc.			Suite, Apt. #, etc.					DO NOT WR	ITE IN THIS	SPACE		
City & State			City & State			4. 1	FEI Number	59-308494	14		pplied For or A	
Zip	<u>-</u>	Country	Zip	Coun	try	5. (Certificate of S	Status Desired		\$8.75 Ad Fee Require		
	6. Name	and Address of Current I	Registered Agent		- 4 ^{(*} 2 - 2 - 2	7. 1	Name and Ad	dress of New	Registered	Agent	-	
					Name							
123	WNELL, ST HICKORY (NDON FL 3	Creek drive			Street Address (P.O. Box Number is Not Acceptable)							
					City				FI	Zip Cod	de e	
8. The above	named entit	ty submits this statement for	the purpose of changing its	s register	ed office or regis	stered ag	ent, or both, ii	the State of F	lorida.			
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if applicatole. (NOT	E: Registere	d Agent signature requ	uired when re	einstating)	 -	DATE			
Tax filing r		gible to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta					on Campaign F fund Contributi			OO May Be d to Fees	
11.		OFFICERS AND	DIRECTORS	12.		AD	DITIONS/CH	ANGES TO OF	FICERS AN	D DIRECTOR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ILL, STEPHEN B. ORY CREEK DR. N FL	☐ Delete		1					□ Change		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	CITY	E EET ADDRESS -ST-ZIP					☐ Change	☐ Additio	
	certify that the	ne information supplied with	this filing does not qualify for	or the exe	mption stated in ture shall have t	n Section the same	119.07(3)(i), F legal effect as	Torida Statutes if made under	. I further co	ertify that the am an office	information r or directo	

of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 il changed, or on an attachment with appears, with all other like empowered.

SIGNATURE: