

8/31/01-902:

**FILED**  
**Sep 21, 2001 8:00 am**  
**Secretary of State**  
08-31-2001 90238 025 \*\*\*550.00

**2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **S84476**  
1. Entity Name  
**SHORE AND COUNTRY CONSTRUCTION, INC.**

Principal Place of Business      Mailing Address  
**128 DAYTON ROAD**                      **128 DAYTON ROAD**  
**LAKE WORTH FL 33467**                      **LAKE WORTH FL 33467**



2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.                      Suite, Apt. #, etc.

City & State                              City & State

Zip      Country                      Zip      Country

4. FEI Number      Applied For  
**65-0287588**                      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required  
                     

6. Name and Address of Current Registered Agent  
**CORPORATION INFORMATION SERVICES INC.**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301**

*SAME COMPANY AS THIS ONE  
THIS IS THEIR KFLA OFFICE*

7. Name and Address of New Registered Agent  
Name      **CORPORATION SERVICE Co.**  
Street Address (P.O. Box Number is Not Acceptable)      **2711 CENTREVILLE RD. ST. 400**  
**WILMINGTON DE**      City      **FL**      Zip Code      **31808**

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 \$550.00**  
**After September 12, 2001 Fee 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	<b>PD</b>	TITLE	
NAME	<b>FEDOR, MICHAEL P.</b>	NAME	
STREET ADDRESS	<b>128 DAYTON ROAD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>LAKE WORTH FL</b>	CITY-ST-ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<b>VD</b>	TITLE	
NAME	<b>FEDOR, DOUGLAS F.</b>	NAME	
STREET ADDRESS	<b>1787 HOLLYWOOD RD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>WELLINGTON FL 33414</b>	CITY-ST-ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<b>ST</b>	TITLE	
NAME	<b>FEDOR, DOUGLAS F.</b>	NAME	
STREET ADDRESS	<b>1787 HOLLYWOOD RD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>WELLINGTON FL 33414</b>	CITY-ST-ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 agents empowered.

SIGNATURE: *Douglas F. Fedor*      **DOUGLAS F. FEDOR**      7-30-01      561-254-6503  
Signature and Typed or Printed Name of Signing Officer or Director      Date      Daytime Phone #

CR2004 (5/01)