

2001 **UNIFORM BUSINESS REPORT (UBR)****FILED**
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91338 013 ***150.00

DOCUMENT # V08050**1. Entity Name**
R.K. CONSTRUCTORS OF CENTRAL FLORIDA, INC.**Principal Place of Business**
4930 OLD WINTER GARDEN ROAD
ORLANDO FL 32811**Mailing Address**
4630 S KIRKMAN ROAD
ORLANDO FL 32811**00054139**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3097824****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****STRONG, HUGH**
7111 FERRIER CT.
ORLANDO FL 32835**Name** **HUGH STRONG**
Street Address (P.O. Box Number is Not Acceptable)
702 DUNN
City **ORLANDO** **FL** **Zip Code** **32707****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 \$850.00**
After SEPTEMBER 15, 2000 Min. will be \$750.00
Make Check Payable to Department of State**10. Election Campaign Financing**
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fee**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	P D REICH, STANTON	4630 S. KIRKMAN RD #221	ORLANDO FL 32811	☐	☐
	S STANTON, REICH	4630 S. KIRKMAN	ORLANDO FL 32811	☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

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 information.**SIGNATURE:****HREB****407541-924**