

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 26, 2001 08:00 AM**
Secretary of State**DOCUMENT # P02473**1. Entity Name
CAJUN CONSTRUCTORS, INC.Principal Place of Business
15635 AIRLINE HIGHWAY
BATON ROUGE LA 70817
Mailing Address
PO BOX 104
BATON ROUGE LA 708210104 US

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

72-0733546

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentCT CORPORATION SYSTEM
1200 S. PINE ISLAND ROADPLANTATION
33324 US

FL

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

03/26/2001

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 \$150.00****After MAY 1, 2001 Fee will be \$550.00****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
NAME ST DAWSON SETH ☐ Delete
STREET ADDRESS 6144 HOPE ESTATES DR
CITY-ST-ZIP BATON ROUGE LA 70820TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME D SEXTON R. GARY ☐ Delete
STREET ADDRESS 6513 PERKINS RD.
CITY-ST-ZIP BATON ROUGE LATITLE
NAME D SEXTON R. GARY ☒ Change ☐ Addition
STREET ADDRESS 6513 PERKINS RD.
CITY-ST-ZIP BATON ROUGE LA 70898TITLE
NAME EVPC GRAUGHNARD MILTON G ☐ Delete
STREET ADDRESS 12459 GOODWOOD BLVD.
CITY-ST-ZIP BATON ROUGE LATITLE
NAME EVPC GRAUGHNARD MILTON G ☒ Change ☐ Addition
STREET ADDRESS 12459 GOODWOOD BLVD.
CITY-ST-ZIP BATON ROUGE LA 70815TITLE
NAME P JACOB JOHN K ☐ Delete
STREET ADDRESS 3381 E LAKESHORE DR
CITY-ST-ZIP BATON ROUGE LA 70808TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME C GRIGSBY L. LANE ☐ Delete
STREET ADDRESS 19145 W MUIRFIELD CIRCLE
CITY-ST-ZIP BATON ROUGE LATITLE
NAME C GRIGSBY L. LANE ☒ Change ☐ Addition
STREET ADDRESS 19145 W MUIRFIELD CIRCLE
CITY-ST-ZIP BATON ROUGE LA 70810TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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 empowered.

SIGNATURE: Seth Dawson

Mr.

03/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)