

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000012232

1. Entity Name

EXTERIORS UNLIMITED, INC.

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

09-18-2000 90020 043 ***550.00

Principal Place of Business

665 S. COURTENAY PKWY.
MERRITT ISLAND FL 32952

Mailing Address

665 S. COURTENAY PKWY.
MERRITT ISLAND FL 32952

2. Principal Place of Business

100-B Plantation Dr.

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Titusville FL

City & State

City & State

4. FEI Number

59-3292350

Applied For

Not Applicable

Zip

32780

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

POLTA, EUGENE K
1806 VIA CAPRI
MERRITT ISLAND FL 32952-2818

7. Name and Address of New Registered Agent

Name

Heaps, Rose M.

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

410 S. Tropical Trail

City

Merritt Island

FL

Zip Code

32952

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.

Rose M. Heaps, President

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9-13-00

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 13, 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 Fees**

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME HEAPS, ROSE M
STREET ADDRESS 7010 N. U.S. HWY 1, CONDO 104
CITY-ST-ZIP COCOA FL

TITLE VP ☐ Delete
NAME COSTIGAN, JAMES LEE
STREET ADDRESS 290 LAKEVIEW BLVD.
CITY-ST-ZIP COCOA FL

TITLE S ☒ Delete
NAME THOMAS, BALK
STREET ADDRESS 299 MAPLE DR
CITY-ST-ZIP SATELLITE FL 32937

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 410 S. Tropical Trail
CITY-ST-ZIP Merritt Island FL 32952

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

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

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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: Rose M. Heaps, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)