

2001 UNIFORM BUSINESS REPORT (UBR) AMEND

DOCUMENT # P96000062061

1. Entity Name
Apartment owners Best Carpet, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 29 PM 12:46

Principal Place of Business Mailing Address
1516 B Capital Circle SE
Tallahassee, FL 32301

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

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

City & State City & State

Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3396783 **Applied For**
☐ **Not Applicable**

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

6. Name and Address of Current Registered Agent

LEVINE, MARK S.
245 East Virginia Street
Tallahassee, FL 32301

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 Kathy Maddox **KATHY MADDOX** **10/8/01**
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. ☐ **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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	Vice President	☐ Delete
NAME	Johnny Johnson	
STREET ADDRESS	9962 Buckpoint Road	
CITY-ST-ZIP	Tallahassee, FL 32312	
TITLE	President	☐ Delete
NAME	Charlotte Johnson	
STREET ADDRESS	9962 Buckpoint Road	
CITY-ST-ZIP	Tallahassee, FL 32312	
TITLE	Secretary	☐ Delete
NAME	Kathy Maddox	
STREET ADDRESS	2217 Monaco Drive	
CITY-ST-ZIP	Tallahassee, FL 32308	
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	TREASURER	☐ Change ☒ Addition
NAME	DAVID T. MADDOX	
STREET ADDRESS	2217 Monaco Drive	
CITY-ST-ZIP	Tallahassee, FL 32308	
TITLE		☐ Change ☐ Addition
NAME	200004699572-4	
STREET ADDRESS	-11/30/01--01014--019	
CITY-ST-ZIP	*****61.25 *****61.25	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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: Kathy Maddox **10/8/01** **(850) 877-6600**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)