

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 29, 2000 08:00 AM**
Secretary of State**DOCUMENT # 324320**

1. Entity Name

M. C. COOK PAINTING & DECORATING, INC.

Principal Place of Business

4825 E. DARTMOUTH LANE

HERNANDO

344423444

FL

US

Mailing Address

4825 E. DARTMOUTH LANE

HERNANDO

3442-444

FL

US

2. Principal Place of Business

4825 E. DARTMOUTH LANE

3. Mailing Address

4825 E. DARTMOUTH LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

HERNANDO

FL

City & State

HERNANDO

FL

4. FEI Number

59-1198354

Applied For

Not Applicable

Zip

34442

Country

US

Zip

34442

Country

US

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required**6. Name and Address of Current Registered Agent**PONDER CHARLES J
THE BOOKKEEPER & ASSOC., INC.
2667-B N. FLORIDA AVE
HERNANDO
34442

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)

04/29/2000

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution.☐\$5.00 May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE V ☐ Delete
NAME THOMPSON JAMES W
STREET ADDRESS 5511 S. WILL POINT
CITY-ST-ZIP HOMOSASSA FL 34446TITLE D ☐ Delete
NAME COOK GEORGIANNA
STREET ADDRESS 455 N. CORBIN AVE
CITY-ST-ZIP INVERNESS FL 34453TITLE DPST ☐ Delete
NAME COOK MICHAEL C
STREET ADDRESS 4825 E. DARTMOUTH LANE
CITY-ST-ZIP HERNANDO FL 34442TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: Michael C. Cook

DPST 04/29/2000