

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2003 8:00 am
Secretary of State

05-07-2003 90147 039 ***150.00

0618010 AV

DOCUMENT # 331917

1. Entity Name
CRAFTSMAN PANEL CORPORATION



Principal Place of Business
**6345 PLUMOSA AVENUE
FORT MYERS FL 33908
US**

Mailing Address
**6345 PLUMOSA AVENUE
FORT MYERS FL 33908
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 **59-1278998**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCKILLOP, ROY JR.
6345 PLUMOSA AVENUE
FORT MYERS FL 33908**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **MCKILLOP, ROY JR.**
STREET ADDRESS **6345 PLUMOSA AVENUE**
CITY-ST-ZIP **FORT MYERS FL 33908**

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

TITLE **D** ☐ Delete
NAME **WOODWARD, RAY**
STREET ADDRESS **5001 S.W. 172ND AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL**

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

TITLE **SD** ☐ Delete
NAME **MCKILLOP, LINDA**
STREET ADDRESS **6345 PLUMOSA AVENUE**
CITY-ST-ZIP **FORT MYERS FL 33908**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roy McKillop Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment #

Craftsman Panel Corporation
6345 Plumosa Avenue
Fort Myers, FL 33908

80015312
331917

May 5, 2003

Ms. Drew Fogarty
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear Ms. Fogarty,

Thank you for agreeing to excuse our being four days late in filing this report. As my husband explained on the telephone today, my brother has been in the hospital in Orlando for over a month with complications from cancer surgery. I was so preoccupied with his condition that I temporarily missed filing this form and paying this fee. We have a thirty-five year history of usually being very prompt paying our bills. Your assistance in this matter is greatly appreciated.

Sincerely,

Linda Morris McKillop

Linda Morris McKillop
Secretary
Craftsman Panel Corporation