

2001 UNIFORM BUSINESS REPORT (UBR)

1/2

FILED
Mar 19, 2001 8:00 am
Secretary of State

01-26-2001 90040 014 ***150.00

DOCUMENT # 366424

1. Entity Name

STEWART LUMBER COMPANY INC

Principal Place of Business

Mailing Address

~~1711 COOK AVE.~~ 229 Gary Ave.
~~ORLANDO FL 32805~~ Oak Hill Fl
32759

~~1711 COOK AVE.~~ 229 Gary Ave
~~ORLANDO FL 32805~~ Oak Hill, Fl
32759

31559



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1295371**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEWART, DREWERY J.
~~1711 COOK AVE.~~ 229 Gary Ave.
~~ORLANDO FL 32805~~ Oak Hill, Fl 32759

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)

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	D	☐ Delete
NAME	STEWART, PAUL	
STREET ADDRESS	1711 COOK AVE 1247 Henry Bakes Dr.	
CITY-ST-ZIP	ORLANDO FL Orlando Fl 32810	
TITLE	VD	☐ Delete
NAME	STEWART, DREWERY	
STREET ADDRESS	1711 COOK AVE 229 Gary Ave.	
CITY-ST-ZIP	ORLANDO FL Oak Hill Fl 32759	
TITLE	CD	☐ Delete
NAME	STEWART, WILLIAM H.	
STREET ADDRESS	1711 COOK AVENUE 229 Gary Ave.	
CITY-ST-ZIP	ORLANDO FL Oak Hill, Fl 32759	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2034 (10/00)