

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 375987

1. Entity Name
THE FAMOUS CARPET BARN, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90048 042 ***150.00

Principal Place of Business CASSAT AVENUE SUNNYSIDE FL 32205	Mailing Address 619 CASSAT AVENUE JACKSONVILLE FLA 32205-4716
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DO NOT WRITE IN THIS SPACE

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 59-1311136	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent

HEMINGWAY, LEROY II
619 CASSET AVE
JACKSONVILLE FL 32205

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE P	<input type="checkbox"/> Delete
NAME HEMINGWAY, LEROY II	
STREET ADDRESS 1980 GREENWOOD AVE.	
CITY-ST-ZIP JACKSONVILLE FL	
TITLE ST	<input type="checkbox"/> Delete
NAME HEMINGWAY, HELEN ANNETTE	
STREET ADDRESS 1980 GREENWOOD AVE.	
CITY-ST-ZIP JACKSONVILLE FL	
TITLE TD	<input type="checkbox"/> Delete
NAME HEMINGWAY, HELEN ANNETTE	
STREET ADDRESS 1980 GREENWOOD AVE.	
CITY-ST-ZIP JACKSONVILLE FL	
TITLE V	<input type="checkbox"/> Delete
NAME RUNION, JOHN	
STREET ADDRESS 4816 KING RICHARD RD.	
CITY-ST-ZIP JACKSONVILLE	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2/18/00 Daytime Phone #: 904-387-2549

CR2E034 (9/99)