

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90142 046 ***158.75

DOCUMENT # 457202

1. Entity Name

KOWAL PAINTING, INC.

Principal Place of Business

3981 SAWYER ROAD
SARASOTA FL 34233
US

Mailing Address

3981 SAWYER ROAD
SARASOTA FL 34233
US

2. Principal Place of Business

6716 DEERING CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

6716 DEERING CIRCLE

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34240

Country

USA

Zip

34240

Country

USA

4. FEI Number

59-1499528

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LIVINGSTON, CHARLES H.
46 N. WASHINGTON BLVD.
SUITE 1
SARASOTA FL 34236

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)

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	KOWAL, RONALD J.	
STREET ADDRESS	3624 S LOCKWOOD RIDGE RD	
CITY-ST-ZIP	SARASOTA FL 34239	
TITLE	SD	<input type="checkbox"/> Delete
NAME	KOWAL, JACQUELINE	
STREET ADDRESS	3624 S LOCKWOOD RIDGE RD	
CITY-ST-ZIP	SARASOTA FL 34239	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	GILLIS, GEORGE R.	
STREET ADDRESS	5532-41ST ST E	
CITY-ST-ZIP	BRADENTON FL 34202	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	6716 DEERING CIRCLE	
CITY-ST-ZIP	SARASOTA, FL 34240	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	6716 DEERING CIRCLE	
CITY-ST-ZIP	SARASOTA, FL 34240	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MICHAEL C. KOWAL	
STREET ADDRESS	3508 Coronado Dr, #111	
CITY-ST-ZIP	SARASOTA, FL 34231	
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		

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:

Ronald J. Kowal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/01

Date

(941) 922-0006

Daytime Phone #

CR2E034 (10/00)