

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 617532

1. Entity Name
ALL-COUNTY SHEET METAL, INC.

FILED
Mar 23, 2001 8:00 am
Secretary of State

03-23-2001 90031 007 ***158.75

Principal Place of Business

1930 7TH COURT NORTH
LAKE WORTH FL 33461
US

Mailing Address

1930 7TH COURT NORTH
LAKE WORTH FL 33461
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1897354**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVIS, RONALD, L
5651 CHASE COURT
WEST PALM BEACH FL 33415

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	PD	<input type="checkbox"/> Delete
NAME	DAVIS, RONALD L	
STREET ADDRESS	5651 CHASE COURT	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	DAVIS, KATHLEEN J	
STREET ADDRESS	5651 CHASE COURT	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	TRASPORT, JAMES, L	
STREET ADDRESS	2347 PINECREST COURT	
CITY-ST-ZIP	W PALM BEACH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Ronald L. Davis

3/15/01

561-588-0089

CR2E034 (10/00)