

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 637189

1. Entity Name

ATLANTIC ROOFING OF VERO BEACH, INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90057 041 ***150.00

Principal Place of Business

Mailing Address

1100 OLD DIXIE HIGHWAY
 VERO BEACH FL 32960

1100 OLD DIXIE HIGHWAY
 VERO BEACH FL 32960-4361

951060



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 **59-1935901**

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

LASKY, WILLIAM JR.
 7475 16TH MANOR
 VERO BEACH FL 32966

Name **LASKY, WILLIAM JR.**

Street Address (P.O. Box Number is Not Acceptable)

1735 AYNLEY WAY

City **VERO BEACH**

FL

Zip Code **32966**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **P LASKY, WILLIAM, JR.**
 STREET ADDRESS **7475 16TH MANOR**
 CITY-ST-ZIP **VERO BEACH FL**

TITLE ☒ Change ☐ Addition
 NAME **P ST LASKY, WILLIAM, JR.**
 STREET ADDRESS **1735 AYNLEY WAY**
 CITY-ST-ZIP **VERO BEACH, FL. 32966**

TITLE ☒ Delete
 NAME **ST LASKY, DOROTHY JEAN**
 STREET ADDRESS **7475 16TH MANOR**
 CITY-ST-ZIP **VERO BEACH FL**

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

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: William Lasky Jr **William Lasky Jr** **561-567-7663**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/99)