

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 642694

1. Entity Name

SUPERIOR ALUMINUM INSTALLATIONS, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90267 010 ***158.75

Principal Place of Business

Mailing Address

3005 FORSYTH RD
WINTER PARK, FL 32792

3005 FORSYTH RD
WINTER PARK, FL 32792-6613

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

59-1951755

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

ORIE SR, THOMAS A
14254 LAKE PRICE DR.
ORLANDO FL 32826

Name

Orie, Alice R.

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

14254 Lake Price Drive

City Orlando

FL

Zip Code 32826

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

Alice R. Orie
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-25-00

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, 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	P	☐ Delete
NAME	ORIE SR, THOMAS A	
STREET ADDRESS	14254 LAKE PRICE DR.	
CITY-ST-ZIP	ORLANDO, FL 00000	
TITLE	ST	☐ Delete
NAME	ORIE, ALICE	
STREET ADDRESS	14254 LAKE PRICE DR.	
CITY-ST-ZIP	ORLANDO, FL 00000	
TITLE	D.	☐ Delete
NAME	STEPHENS, ALICE O	
STREET ADDRESS	3423 PAISLEY CIRCLE	
CITY-ST-ZIP	ORLANDO FL	
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	D	☒ Change ☐ Addition
NAME	Orie Sr., Thomas A.	
STREET ADDRESS	14254 Lake Price Drive	
CITY-ST-ZIP	Orlando, FL 32826	
TITLE	P	☒ Change ☐ Addition
NAME	Orie, Alice R.	
STREET ADDRESS	14254 Lake Price Drive	
CITY-ST-ZIP	Orlando, FL 32826	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V/M	☐ Change ☒ Addition
NAME	Orie, Timothy J.	
STREET ADDRESS	13122 Marsh Fern Drive	
CITY-ST-ZIP	Orlando, FL 32828	
TITLE	S/T	☐ Change ☒ Addition
NAME	Orie, Gina M.	
STREET ADDRESS	13122 Marsh Fern Drive	
CITY-ST-ZIP	Orlando, FL 32828	
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:

Alice R. Orie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-00

Date

407-618-0500

Daytime Phone #

CR2E034 (9/99)