

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F00000007168**

1. Entity Name

INSTALLGUYS, INC.

FILED

01 SEP 27 AM 8:52

Principal Place of Business

1748 INDEPENDENCE BLVD., BLDG. C-5
SARASOTA FL 34234

Mailing Address

1748 INDEPENDENCE BLVD., BLDG. C-5
SARASOTA FL 34234SECRETARY OF STATE
TALLAHASSEE, FLORIDA
80060680

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

APPLIED FOR

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

MCKINNEY, MICHAEL
4534 ASCOT CIRCLE SOUTH
SARASOTA FL 34235

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 state 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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME SANGUINETI, BRUCE
STREET ADDRESS 1748 INDEPENDENCE BLVD., BLDG. C-5
CITY-ST-ZIP SARASOTA FL 34234 ☒ DeleteTITLE SD
NAME WRIGHT, JAY D
STREET ADDRESS 1748 INDEPENDENCE BLVD., BLDG. C-5
CITY-ST-ZIP SARASOTA FL 34234 ☒ DeleteTITLE CD
NAME MCKINNEY, MICHAEL
STREET ADDRESS 1748 INDEPENDENCE BLVD., BLDG. C-5
CITY-ST-ZIP SARASOTA FL 34234 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT
NAME TOM ANTHONY
STREET ADDRESS 1748 INDEPENDENCE BLVD, B3
CITY-ST-ZIP SARASOTA FL 34234 ☐ Change ☒ AdditionTITLE VICE PRESIDENT
NAME DEVIN BOSCH
STREET ADDRESS 1748 INDEPENDENCE BLVD, B3
CITY-ST-ZIP SARASOTA FL 34234 ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 #

CR2E034 (10/00)