

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2003 8:00 am
Secretary of State

08-21-2003 90108 034 ***150.00

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DOCUMENT # F18726

1. Entity Name
VINCENT RADCLIFFE CUSTOM DRAPERIES, INC.

(L) ✓



Principal Place of Business
**116 N. ORION AVE.
CLEARWATER FL 33765**

Mailing Address
**116 N. ORION AVE.
CLEARWATER FL 33765**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2060608**

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

**RADCLIFFE, SHERRY C
116 N. ORION AVE.
CLEARWATER FL 33765**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **RADCLIFFE, SHERRY C**
STREET ADDRESS **116 N ORION ST**
CITY-ST-ZIP **CLEARWATER FL**

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

TITLE **V.P** ☐ Delete
NAME **Troy Radcliffe**
STREET ADDRESS **1814 B. Sunset Pt. Ad.**
CITY-ST-ZIP **Clw., FL. 33765**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Sherry Radcliffe** **SIGNATURE REQUIRED** **Sherry Radcliffe** **8-18-03** **727-446-3386**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

Attachment

RADCLIFFE CUSTOM INTERIORS INC

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116 N. Orion Ave ☉ Clearwater, Florida 33765
Phone 727-446-3386 ☉ Fax 727-461-5372

80139517
F18726

August 18, 2003

To Whom it my concern,

I have recently received my 2003 Uniform Business Report, and regrettably realized that I did not receive the first notice. So I am including my check for \$150.00 Corporate Filing Fee.

CALL ME IF YOU HAVE ANY ????????

Sincerely

Sherry Radcliffe

Sherry Radcliffe