

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 12, 2003 8:00 am**  
**Secretary of State**

0069899 AV

**DOCUMENT # F32081**

1. Entity Name  
**REX CREWS FLOORING COMPANY, INC.**



05-12-2003 90197 017 \*\*\*150.00

Principal Place of Business  
**992 WILLIAMS DITCH RD  
CANTONMENT FL 32533  
US**

Mailing Address  
**992 WILLIAMS DITCH RD  
CANTONMENT FL 32533  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2097050**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CREWS, REX  
992 WILLIAMS DITCH RD  
CANTONMENT FL 32533**

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 \$150.00  
After May 1, 2003 Fee will be \$550.00  
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 NAME ☐ Delete  
**DSV  
CREWS, LOTTIE NELL  
992 WILLIAM DITCH ROAD  
CANTONMENT FL**

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

TITLE NAME ☐ Delete  
**DP  
CREWS, REX  
992 WILLIAM DITCH ROAD  
CANTONMENT FL**

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

TITLE NAME ☐ Delete  
**DV  
CREWS, DANIEL R.  
972 WILLIAMS DITCH RD.  
CONTONMENT FL**

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

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE NAME ☐ Delete  
STREET ADDRESS  
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TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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:

*Lottie Nell Crews, V. Pres.*

*May 9, 2003*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

**Rex Crews**  
SALES & SERVICE

**Flooring Company, Inc.**

80118224  
F32081

May 9, 2003

Please accept our apologies for this filing being late. I got it out over a month ago to send it in and was distracted for another chore. It was mixed in with some papers on my desk. If you will check our record you will see we usually file and pay early in the year. I am begging you to please not charge us the late fee. It is so large and will put a hardship on our small company.

Thank you for your consideration.

Sincerely,

Lottie Nell Crews

V. Pres. & Sec.