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Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 28, 2001 8:00 am **DOCUMENT # F55447 Secretary of State** 1. Entity Name CHESTER WEBB & SONS AUTO PAINTING, INC. 03-28-2001 90070 016 ***150.00 Principal Place of Business Mailing Address C/O CHESTER WEBB C/O CHESTER WEBB 1010 N. NOVA ROAD 1010 N. NOVA ROAD DAYTONA BEACH FL 32117 DAYTONA BEACH FL 32117 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-2045794 Applied For Not Applicable Zip Country 2in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEBB (CHESTER) Street Address (P.O. Box Number is Not Acceptable) 1010 N. NOVA ROAD DAYTONA BEACH FL 32017 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (10/00) ☐ Change ☐ Addition TITLE Delete TITLE WEBB, CHESTER, SR. NAME NAME 1010 N. NOVA RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition WEBB (CHESTER), JR. NAME NAME 1010 N. NOVA RD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DAYTONA BEACH FL 32117 TITLE ☐ Delete TITLE ☐ Change ☐ Addition DECATOR, RENEE NAME NAME STREET ADDRESS 685 SANDERLING DR STREET ADDRESS CITY-ST-ZIP INDIALANTIC FL 32903 CITY-ST-ZIP AS Delete TITLE TITLE ☐ Change ☐ Addition BEESLEY, JOY NAME NAME **4095 QUAIL NEST LANE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW SMYRNA BCH FL** CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE WEBB, JERRY NAME NAME **15TH ST** STREET ADDRESS STREET ADDRESS CITY-ST-7IP HOLLY HILL FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WEBB. UDELL J. NAME NAME 1010 N. NOVA RD. STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 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.