

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90704 033 ***150.00

DOCUMENT # **F86717** ✓

1. Entity Name

ELASTIC ROOF COATING, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6537 116TH AVE. NORTH

3. Mailing Address

7457 JONQUIL PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LARGO FL.

City & State

SPRING HILL FL.

Zip

33771

Country

FLORIDA

Zip

34607

Country

FLORIDA

4. FEI Number

592199931

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

EVELYN SLAYTON

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

7457 JONQUIL PLACE

SPRING HILL, FL.

City

SPRING HILL -

FL

Zip Code

34607-2025

**DO NOT WRITE
IN THIS SPACE**

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

Evelyn Slayton EVELYN SLAYTON

4/5/02

Signature, typed or printed name of registered agent and title 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) ☒

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE **PRESIDENT / DIRECTOR / ST**
NAME **EVELYN SLAYTON**
STREET ADDRESS **7457 JONQUIL PL. SPRING HILL, FL.**
CITY-ST-ZIP **34607**

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Evelyn Slayton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/5/02

Daytime Phone #

352-592-6277

CR2E034B (12/01)