

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000001002

1. Entity Name
SUNLITE CASUAL FURNITURE, INC.

FILED
Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90019 007 ***150.00

Principal Place of Business

1400 DONELSON PIKE
SUITE B-4
NASHVILLE TN 37217
US

Mailing Address

1400 DONELSON PIKE
SUITE B-4
NASHVILLE TN 37217
US

2. Principal Place of Business

5217 LINBAR DR
Suite, Apt. #, etc.
SUITE 309

3. Mailing Address

5217 LINBAR DR
Suite, Apt. #, etc.
SUITE 309

City & State
NASHVILLE, TN

Zip
37211

Country
USA

City & State
NASHVILLE, TN

Zip
37211

Country
USA

4. FEI Number 58-2289163

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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 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) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 P
NAME OLIVIERE, JAMES V.
STREET ADDRESS 1400 DONELSON PIKE, SUITE B-4
CITY-ST-ZIP NASHVILLE TN 37217 ☒ Delete

TITLE VS
NAME ZITMAN, HAIM
STREET ADDRESS 320 E 52ND ST, APT 14A
CITY-ST-ZIP NEW YORK NY 10022 ☐ Delete

TITLE V
NAME EIGER,
STREET ADDRESS 526 E 89TH ST
CITY-ST-ZIP NEW YORK NY 10128 ☐ Delete

TITLE V
NAME BORER, JOHN
STREET ADDRESS 377 RAVINE DR
CITY-ST-ZIP SOUTH ORANGE NJ 07079 ☐ Delete

TITLE V
NAME HUMPHRIES, RANDY
STREET ADDRESS 9035 W 175TH ST
CITY-ST-ZIP OLATHE KS 66062 ☐ Delete

TITLE V
NAME NEWCOMB, JOE
STREET ADDRESS 44 BELCHER DR
CITY-ST-ZIP SUDBURY MA 01776 ☒ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME MAXWELL, EARLE, W. JR.
STREET ADDRESS 5217 LINBAR DR, SUITE 309
CITY-ST-ZIP NASHVILLE, TN 37211 ☐ Change ☒ Addition

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

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

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

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

TITLE
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 of Joe Newcomb
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/11/00 615-365-6054

CR2E034 (5/00)

ATTACHMENT
F97000001002
W92895

Sunlite did not receive first
notice.

LG B

7/11/00

Per phone conv, fee is \$150.00

Florida Department of State