

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 03, 2000 8:00 am**  
**Secretary of State**

04-03-2000 90203 040 \*\*\*150.00

**DOCUMENT # F970000001017**

1. Entity Name

Paper Work Blues?, Inc. ✓

Principal Place of Business

Little Diamond Island  
Portland, Maine 04109

Mailing Address

677 N. Washington Blvd.  
Sarasota FL 34236

**632311**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

01-0463005

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Vittiglio, John B. Jr.  
c/o Sarasota Executive Suites, Inc.  
677 N. Washington Blvd.  
Sarasota, FL 34236

7. Name and Address of New Registered Agent

Name Kathryn King

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

2422 Juniper Place

City Sarasota

FL

Zip Code 34239-4124

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

KATHRYN KING Kathryn King

3-20-2000

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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 CVS ☐ Delete  
NAME Dunn, Harry B.  
STREET ADDRESS Little Diamond Island  
CITY-ST-ZIP Portland, Maine 04109

TITLE PT ☐ Delete  
NAME Dunn, Harry R.  
STREET ADDRESS Little Diamond Island  
CITY-ST-ZIP Portland, Maine 04109

TITLE D ☐ Delete  
NAME Noon, John P.  
STREET ADDRESS 255 S. Midway St.  
CITY-ST-ZIP Campbell CA 95008

TITLE D ☐ Delete  
NAME Noon, Ann  
STREET ADDRESS 255 S. Midway St.  
CITY-ST-ZIP Campbell, CA 95008

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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.

SIGNATURE:

Harry R. Dunn

Harry R. Dunn

3/27/00

207-766-2655

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #