

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G65964

1. Entity Name

PAPAGEORGE'S LAMP & LIGHTING SERVICE, INC.

FILED

Jan 19, 2001 8:00 am  
Secretary of State

01-19-2001 90045 035 \*\*\*150.00

Principal Place of Business

27 SO DIXIE HWY  
LAKE WORTH FL 33460

Mailing Address

27 SO DIXIE HWY  
LAKE WORTH FL 33460

2. Principal Place of Business

9018 GARDENS GLEN CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

9018 GARDENS GLEN CIRCLE

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PALE BEACH GARDENS, FL

Zip  
33418

Country  
USA

City & State

PALE BEACH GARDENS, FL

Zip  
33418

Country  
USA

4. FEI Number 59-2336524

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PAPAGEORGE, WILLIAM A., JR.  
9018 GARDEN GLEN CIRCLE  
WEST PALM BEACH FL 33418

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 \$150.00**  
**After MAY 1, 2001 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 DP  
NAME PAPAGEORGE WM A JR  
STREET ADDRESS 9018 GARDENS GLEN CIRCLE  
CITY-ST-ZIP WEST PALM BEACH FL 33418 ☐ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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  
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STREET ADDRESS  
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William A. Papageorge, Jr

Date

1-10-2001

Daytime Phone #

1-561-882-4034

CR2E034 (10/00)

0317695