2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G96115

1. Entity Name

THE GRATE FIREPLACE & STONE SHOPPE, INC.

Principal Place of Business

Mailing Address

FILED
May 03, 2001 8:00 am
Secretary of State
05-03-2001 90062 039 ***150.00

METRO PLACE		11000 METRO PARKWAY. SUTIE 8 METRO PLACE FORT MYERS FL 33912			1 (88) () 88/8 18/8 8/0(() 88 1130 U20)	enesi erair e		Z Ž	
2. Principal Place of Business 11000 METRO PARKWAY #9		3. Mailing Address SAME							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE	N THIS SF	'ACE		
UNIT #9		SAME			C. V				
City & State FORT MYERS, FL.		City & State SAME		4. 🖹	El Number 59-2390106			oplied For ot Applicable	
Zip _ 33912.	Country USA	Zip _33912	Country USA	5. C	ertificate of Status Desired		8.75 Addee Require		
	6. Name and Address of Current R	egistered Agent	·	7 ⁵ N	ame and Address of New Regi	stered Ag	ent		
STASKO, WILLIAM J. 11000 METRO PKWY, STE 8 FT. MYERS FL 33912			Name	Name Street Address (P.O. Box Number is Not Acceptable)					
			Street Addres						
FI. N	11EN3 FL 33912		- 7.				7:- 0		
			City			FL	Zip Code	e	
•	Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible	FILE NOW!!	Registered Agent signature requ		nstating) 10. Election Campaign Finance	DATE		0 May Be	
	requirement and elects to do so. ia on back)	After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta		L	Trust Fund Contribution.			to Fees	
11.	OFFICERS AND D	IRECTORS	12.	ADD	DITIONS/CHANGES TO OFFICE	RS AND D	RECTOR	S IN 11	
TITLE	PD WILLIAM	☐ Delete	TITLE			្រ	Change	Addition	
NAME	STASKO, WILLIAM J.		NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	17576 TAYLOR DRIVE, S.W. FT. MYERS FL		CITY-ST-ZIP						
TITLE	SD	☐ Delete	TITLE			Г	☐ Change	☐ Addition	
NAME	STASKO, HELYN R.	- Delete	NAME				change		
STREET ADDRESS	17576 TAYLOR DRIVE, S.W.		STREET ADDRESS					Ì	
CITY-ST-ZIP	FT. MYERS FL		CITY-ST-ZIP						
TITLE	T	☐ Delete	TITLE			[Change	☐ Addition	
NAME STREET ADDRESS	KEY, DIANE M 17564 TAYLOR DR SW		NAME STREET ADDRESS						
CITY-ST-ZIP	FORT MYERS FL 33908		CITY-ST-ZIP						
TITLE	1,011,111,111,111,111,111,111,111,111,1	☐ Delete	TITLE		the territory of the te	F	Change	☐ Addition	
NAME		0000	NAME			_			
STREET ADDRESS			STREET ADDRESS					Ì	
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE			Ε	Change	Addition	
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				Change	☐ Addition	
NAME			NAME			_	_ •		
STREET ADDRESS		•	STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
13. hereby o	ertify that the information supplied with th	is filin g does not qualify for t	he exemption stated in	Section 1	19.07(3)(i), Florida Statutes. I fur	ther certify	that the in	formation	

port is true and accourate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if rass, with an other like empowered. indicated on this report or supplementary of the corporation or the receiver or truste changed, or on an attachment of the receiver or truster changed, or on an attachment of the receiver of

HELYN R. STASKO

Daytime Phone #