

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 21, 2003 8:00 am
Secretary of State

07-21-2003 90135 009 ***550.00

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DOCUMENT # H15411

1. Entity Name
ENVIRONMENTAL DESIGNS UNLIMITED, INC.



Principal Place of Business
2250 GULF GATE DR
A
SARASOTA FL 34231
US

Mailing Address
2250 GULF GATE DR
A
SARASOTA FL 34231
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2428051**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARQUA, JAMES E.
2250 GULF GATE DR., SUITE A
SARASOTA FL 34231

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

James E. Marqua PRESIDENT
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/18/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **MARQUA, JAMES E.**
STREET ADDRESS **4502 FRIAR TUCK LANE**
CITY-ST-ZIP **SARASOTA FL**

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

TITLE **S** ☐ Delete
NAME **MARQUA, DEBRA**
STREET ADDRESS **4502 FRIAR TUCK LN.**
CITY-ST-ZIP **SARASOTA FL**

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

TITLE **V** ☒ Delete
NAME **ELLIS, RICHARD**
STREET ADDRESS **8588 POTTER PARK DRIVE, SUITE 100**
CITY-ST-ZIP **SARASOTA FL 34238**

TITLE **V** ☐ Change ☒ Addition
NAME **Busche, Richard**
STREET ADDRESS **8586 Potter Park Drive, Suite 100**
CITY-ST-ZIP **Sarasota, FL 34238**

TITLE **V** ☐ Delete
NAME **STOVALL, THOMAS**
STREET ADDRESS **8586 POTTER PARK DR STE 100**
CITY-ST-ZIP **SARASOTA FL 34238**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James E. Marqua
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/03
Date

941-922-0598
Daytime Phone #

CR2E034 10/02