2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State
02-19-2002 90074 015 ***150.00

0536096 AT

DOCUMENT # H22316

1. Entity Name
ROYAL AMERICAN WALLCRAFT, INC.

Principal Place of Business	Mailing Address
105 SILVER BEACH BLVD POMONA PARK FL 32181 US	PO BOX 880 POMONA PARK FL 32181-880 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
501 CENTRAL AVE., Suite, Apt. #, etc.	501 CENTRAL AVE., Suite, Apt. #, etc.
City & State: CRESCENT CITY, FL	City & State: CRESCENT CITY, FL
Zip: 32112-2503 Country: USA	Zip: 32112-2503 Country: USA.

4. FEI Number 59-2510817 ☐ Applied For ☐ Not Applicable

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
DENE R. BERRY 105 SILVER BEACH BLVD., RR1 BOX 860 POMONA PARTK FL 32181 OK.	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 DENE R. BERRY OOPS - NOT APPLICABLE 1/30/02
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, 2002 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BERRY, DENE R 105 SILVER BEACH BLVD POMONA PARK FL 32181	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WILSHIRE, GLENNIS M 105 SILVER BEACH BLVD POMONA PARK FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BERRY, DENE R 105 SLIVER BEACH BLVD POMNOA PARK FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORMAN, ROBERT J 515 SOUTH INDIAN RIVER DR. FT. PIERCE FL 34950	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HANSON, PETER 1 HILLSIDE DR. CLECKHEATON, W.YORKS ENGLAND	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

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: DENE R. BERRY 1/30/02 386-698-1236.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #