

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **H26187**

1. Entity Name
KNAPP'S STUCCO, INC.

FILED
Aug 31, 2001 8:00 am
Secretary of State

08-13-2001 90002 020 ***150.00

Principal Place of Business
**1462 KEY WAY RD.
ENGLEWOOD FL 34223**

Mailing Address
**1462 KEY WAY RD.
ENGLEWOOD FL 34223**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2455797**

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

**KNAPP, WALTER A
1462 KEY WAY RD.
ENGLEWOOD FL 34223**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **PD**
NAME **KNAPP, WALTER A.**
STREET ADDRESS **1462 KEY WAY RD.**
CITY-ST-ZIP **ENGLEWOOD FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **VST**
NAME **KNAPP, SHIRLEY**
STREET ADDRESS **1462 KEY WAY RD.**
CITY-ST-ZIP **ENGLEWOOD FL**

☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Walter Knapp
Shirley Knapp VST
8/31/01 941-494-2462

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment 11667

#H26187

To Whom It May Concern

Aug 20th 2004

I just got the document H26187 Knapp's Stucco Inc
in the mail I mail a check Aug 6th for \$150.00

Now I get a letter back saying I owe \$400.00 in
late fees I don't feel I should have to pay this
as I did pay as soon as I got it.

This was the only notice I got in the
mail to be paid.

Thank you

Stacy Knapp

Knapp's Stucco Inc.

(941) 474-2462

P.S.

Please do call if there is
any other question I can help
with.