2001 UNIFORM BUSINESS REPORT (UBR)

AMENDED

DOCUMENT # H75063

1. Entity Name

TED KLINGER CEILINGS & COMMERCIAL REMODELING, INC.

FILED

01 DEC 12 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-12/26/01--01103--019
*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1453 S. GREENWOOD AVE CLEARWATER, FL 33756	SAME

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2576550 ☐ 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
GARY W. LYONS 311 SOUTH MISSOURI AVE CLEARWATER, FL	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! FEES = $150.00
After MAY 1, 2001 Fee will be $400.00
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 THEODORE V. KLINGER 1285 LINCOLN AVE CLEARWATER, FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LS	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MARY GRACE KLINGER 1285 LINCOLN AVE CLEARWATER FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MARY GRACE KLINGER 1102 SOUTH MISSOURI AVE #211 CLEARWATER, FL 33756	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SANDRA M. KLINGER 1285 LINCOLN AVE CLEARWATER, FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP, S DONEEN DiPOLITO 1624 PARKSIDE Dr. CLEARWATER, FL 33756.	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T THOMAS V. KLINGER 1285 LINCOLN AVE CLEARWATER, FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DAVID E. SUGGS 7969 140TH ST. N. SEMINOLE, FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ANDREW J. CAUDELL 2124 FREDERICK CIR. CLEARWATER, FL 33763	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/00)

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: Mary Grace Klinger 11-9-2001 7274614766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #