

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 25, 2002 8:00 am**  
**Secretary of State**

06-25-2002 90439 011 \*\*\*150.00

**DOCUMENT # J30642**

1. Entity Name  
**R & R CARPENTRY, INC.**

Principal Place of Business

P.O. BOX 932  
 DEBARY FL 32713

Mailing Address

P.O. BOX 932  
 DEBARY FL 32713

2. Principal Place of Business

**103 Plantation Rd PO Box 530932**

3. Mailing Address

**PO Box 530932**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**DeBary FL**

City & State

**DeBary FL**

Zip

**32713**

Country

**USA**

Zip

**32713**

Country

**USA**

4. FEI Number

**59-2742770**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**ROBINSON, PATRICIA**  
**103 PLANTATION RD.**  
**DEBARY FL 32713**

7. Name and Address of New Registered Agent

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 \$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

TITLE **P** ☐ Delete  
 NAME **ROBERTSON, RICHARD**  
 STREET ADDRESS **103 PLANTATION RD**  
 CITY-ST-ZIP **DEBARY FL 32713**

TITLE **VP** ☐ Delete  
 NAME **ROBERTSON, PATRICIA**  
 STREET ADDRESS **103 PLANTATION RD**  
 CITY-ST-ZIP **DEBARY FL 32713**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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:

**Patricia Robertson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**352-267-7294**

CR2E034 (9/01)

Attachment  
To Whom It May Concern: B0125587  
# J30642

Our P.O. box was changed  
to 530932. Therefore, I just  
received this notice. I am  
respectfully requesting a waiver  
on the \$400 late fee.

Patricia Robertson

R & R Carpentry

59-2742770