## 2003 FOR PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR)

J60723 DOCUMENT #

8629 PHILLIPS HIGHWAY

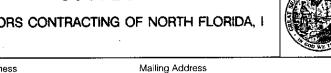


04-21-2003 90532 005 \*\*\*150.00

**FILED** 

Apr 21, 2003 8:00 am Secretary of State

TIPTON INTERIORS NC.	CONTRACTING OF NORTH FLORIDA, I
Principal Place of Business	Mailing Address



P.O. BOX 2614

OCALA FL 34478 JACKSONVILLE FL 32256 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-2811159 Not Applicable Zíp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TIPTON, JERRY WAYNE Street Address (P.O. Box Number is Not Acceptable) 20651 NE HWY 27 WILLISTON FL 32696 City 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition ☐ Delete TITLE TIPTON, JERRY WAYNE NAME NAME P.O. BOX 2614 NA STREET ADDRESS STREET ADDRESS **OCALA FL** CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME MCCLANE, LISA TIPTON NAME STREET ADDRESS 4451 S.E. 145TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Summerfield fl' ಕ್ಕ ಕರ್ಕಾರ್ಥ ಗುಡಬಾಡುವು ☐ Addition TITLE ☐ Delete -TITLE Change NAME UNLAND, SHERRI-TIPTON NAME STREET ADDRESS PO BOX 681 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OKLAWAHA FL ☐ Delete ☐ Change Addition DILE LEVERT, RENNA TIPTON NAME NAME 4449 S.E. 145TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CJTY-ST-7IP SUMMERFIELD FL Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

April 17, 2003

(352)629 - 3300

Daytime Phone #