

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K44678

1. Entity Name

MALTBY'S CUSTOM CABINETS, INC.

FILED
Mar 10, 2000 8:00 am
Secretary of State

03-10-2000 90039 042 ***150.00

Principal Place of Business

205 S THIRD STREET
3010 THIRD STREET SOUTH, SUITE A
JACKSONVILLE BEACH FL 32250
US

Mailing Address

205 S THIRD STREET
3010 THIRD STREET SOUTH, SUITE A
JACKSONVILLE BE 32250-6033
US

2. Principal Place of Business

205 S 3rd Street
Suite, Apt. #, etc.

3. Mailing Address

205 S 3rd Street
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Jacksonville Beach FL
Zip 32250 Country US

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Jacksonville Beach, FL
Zip 32250 Country US

4. FEI Number

59-2920946

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PATTERSON, LAWRENCE R.
3010 THIRD STREET SOUTH
SUITE A
JACKSONVILLE BEACH FL 32250

7. Name and Address of New Registered Agent

Name Richard J. Maltby
Street Address (P.O. Box Number is Not Acceptable)
205 S 3rd Street
City Jacksonville Beach FL Zip Code 32250

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

Helen B. Maltby
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/07/00

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, 2000 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	DP	<input type="checkbox"/> Delete
NAME	MALTBY, RICHARD J.	
STREET ADDRESS	205 S THIRD STREET	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	DST	<input type="checkbox"/> Delete
NAME	MALTBY, HELEN B.	
STREET ADDRESS	205 S THIRD STREET	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE	V	<input type="checkbox"/> Delete
NAME	STOFFELS, JAMES W.	
STREET ADDRESS	240 CORAL WAY	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

HELEN MALTBY
HELEN MALTBY, Sec/Treas

Date

2/16/00

Daytime Phone #

904-241-5831

CR2E034 (9/99)