

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

001413 AV

DOCUMENT # **K84732**

1. Entity Name
VALL-Y-WORLD CUSTOM FRAMING, INC.

02-20-2002 90025 027 ***150.00

Principal Place of Business

**73 SOUTH YOUNGE STREET
 (JS1)
 ORMOND BEACH FL 32174
 IS**

Mailing Address

**% DAVID C. ROBINSON, ESQUIRE
 1326 S. RIDGEWOOD AVENUE #6
 DAYTONA BEACH FL 32114-7207**



2. Principal Place of Business

**173 S. Yonge St
 Suite, Apt. #, etc.
 Ormond Beach**

3. Mailing Address

**1326 S Ridgewood Ave
 Suite, Apt. #, etc.
 #6**

DO NOT WRITE IN THIS SPACE

City & State

FL

City & State

DAYTONA Beach FL

4. FEI Number

59-2953364

Applied For

Not Applicable

Zip

32174

Country

USA

Zip

32114-7207

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**ROBINSON, DAVID C., ESQUIRE
 1326 S. RIDGEWOOD AVENUE
 #6
 DAYTONA BEACH FL 32014**

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 **PD** ☐ Delete
 NAME **SMITH, STEPHEN W.**
 STREET ADDRESS **807 S YONGE ST**
 CITY-ST-ZIP **ORMOND BEACH FL 32174**

TITLE **S** ☐ Delete
 NAME **SMITH, DONNA M.**
 STREET ADDRESS **807 S YONGE ST**
 CITY-ST-ZIP **ORMOND BEACH FL 32174**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
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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 **P/O** ☒ Change ☐ Addition
 NAME **Smith, Stephen W**
 STREET ADDRESS **173 S. Yonge St**
 CITY-ST-ZIP **Ormond Beach FL 32174**

TITLE **S** ☒ Change ☐ Addition
 NAME **Smith, Donna M**
 STREET ADDRESS **173 S. Yonge St**
 CITY-ST-ZIP **Ormond Beach FL 32174**

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

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

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

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:

Stephen W. Smith

Date

Daytime Phone #

2-1-02 386 673-2916

CR2E034 (9/01)