FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90433 012 ***150.00

DOCUMENT # L26278

1. Entity Name
Double Eagle Woodworking, Inc. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1526 3rd Ave W	1526 3rd Ave W
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bradenton FL	City & State: Bradenton FL
Zip: 34205 Country: U.S.A.	Zip: 34205 Country: USA.

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0160317 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Stowe, Melvin F.

Street Address (P.O. Box Number is Not Acceptable): 1526 3rd Ave W

City: Bradenton **FL** Zip Code: 34205

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) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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
NAME	Stowe, Melvin F.
STREET ADDRESS	1526 3rd Ave W.
CITY-ST-ZIP	Bradenton FL 34205
TITLE	DST
NAME	Stowe, Rayma J.
STREET ADDRESS	1526 3rd Ave W.
CITY-ST-ZIP	Bradenton FL 34205
TITLE	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Rayma J Stowe Rayma J Stowe 4.27.02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #