

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # L31035**

1. Entity Name

LESTER HOLLAND BUILDING CORPORATION**FILED****01 JUL 23 PM 4:06****SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**1181 SUN CENTURY RD
NAPLES FL 34110
US**

Mailing Address

**1181 SUN CENTURY RD
NAPLES FL 34110
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0251211

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HOLLAND, LESTER
1181 SUN CENTURY RD
NAPLES FL 33963**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **D** ☐ Delete
NAME **HOLLAND, LESTER**
STREET ADDRESS **1181 SUN CENTURY RD**
CITY-STATE-ZIP **NAPLES FL**TITLE **D** ☐ Delete
NAME **HOLLAND, BRENDA**
STREET ADDRESS **1181 SUN CENTURY RD**
CITY-STATE-ZIP **NAPLES FL**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-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:

SIGNATURE OF OFFICER OR DIRECTOR**7/5/01**

Date

941-597-7662

Daytime Phone #

CR2E034 (5/01)

LESTER HOLLAND

7/5/01

Payer

CUSTOM WOOD FURNITURE, INC.

1181 Sun Century Road

Naples, Florida 34110

(941) 597-7661

Fax (941) 597-7662

Hello

We did not get The notice to
pay in January. I called & spoke
to Carol. She said I could down

load a Form: As you can see I
could not. I Am sending you in
good faith payments for both

Lester Holland Building Corp - L31035

&

Lester Holland Custom Wood Furniture Inc
- P96000070378

I also put in our report from
year 2000 to show that we
do pay on time

Waiting for your reply

Brenda Holland

Holland Brenda @ AOL.com

941.597.7662 - phone & fax