

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State
 04-17-2001 90060 039 ***150.00

DOCUMENT # L55966

1. Entity Name
S.W. FLA. FLOORCRAFTERS, INC.

Principal Place of Business

**12821 METRO PKWY
 FORT MYERS FL 33912
 US**

Mailing Address

**12670 NEW BRITTANY BLVD
 SUITE 101
 FORT MYERS FL 33907
 US**

2. Principal Place of Business

12890 Metro Parkway

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Fort Myers, FL

City & State

4. FEI Number **65-0138948**

Applied For

Not Applicable

Zip

Country

33912

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROYSTON, ROBERT D J
 12670 NEW BRITTANY BLVD
 SUITE 101
 NAPLES FL 33907**

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VSD
 KNAPP, KEVIN K.
 14638 AERIES WAY DRIVE
 FT. MYERS FL 33912** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P, ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PTD
 SENEAL, MARC J.
 6500 MAYTREE CIR
 FT. MYERS FL 33905** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
T, Second Vice president ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**SD
 SPALLONE, VINCENT
 6344 PLUMOSA AVE
 FT MYERS FL 33908** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
S, First Vice president ☒ Change ☐ Addition
**6123 Montego Bay Loop
 Fort Myers, FL 33908**

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

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:

Kevin K. Knapp
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/01
 Date

Daytime Phone #

CR2E034 (10/00)