2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2000 8:00 am
Secretary of State
06-19-2000 90002 031 ***550.00

DOCUMENT # M66392

1. Entity Name

CHAPPIE'S CARPET & FLOORS, INC.

Principal Place of Business	Mailing Address
2744 STICKNEY POINT ROAD SARASOTA FL 34231	2744 STICKNEY POINT ROAD SARASOTA FL 34231-6022
CHANGE	CHANGE
2. Principal Place of Business: 3913 CLARK Rd	3. Mailing Address: 3913 CLARK Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
SARASOTA	SARASOTA
City & State: FL	City & State: FL
Zip: 34233 Country:	Zip: 34233 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0026641 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GIERHART, CHARLES A.
100 WALLACE AVENUE, SUITE 330
SARASOTA FL 34237

CHANGE

7. Name and Address of New Registered Agent

Name: SUPLEE & SHEA P.A.
Street Address (P.O. Box Number is Not Acceptable): 500 South Osprey Ave
City: SARASOTA FL Zip Code: 34236

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: Kenneth R Chapman 6-12-44
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, 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CHAPMAN, KENNETH R. 7460 CASS CIRCLE SARASOTA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHAPMAN, PATRICIA 7460 CASS CIRCLE SARASOTA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CHAPMAN, KENNETH JR. 4935 CEDAR OAK WAY SARASOTA FL 34232	☐ 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
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: Kenneth R Chapman Pres. 6-12-00 941-923-5499
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #