

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 04, 2001 8:00 am  
Secretary of State

05-04-2001 90063 014 \*\*\*150.00

DOCUMENT # M96399

1. Entity Name

AFFORDABLE CARPET OF PINELLAS, INC.

Principal Place of Business

541 SAN CHRISTOPHER DR  
DUNEDIN FL 34698

Mailing Address

541 SAN CHRISTOPHER DR  
DUNEDIN FL 34698

2. Principal Place of Business

343 E DOUGLAS RD

Suite, Apt. #, etc.

3. Mailing Address

343 E DOUGLAS RD

Suite, Apt. #, etc.

City & State

OLDSMAR FL

City & State

OLDSMAR FL

4. FEI Number

59-2914191

Applied For

Not Applicable

Zip

34677

Country

PINELLAS

Zip

34677

Country

PINELLAS

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

6. Name and Address of Current Registered Agent

SPATH, MARY D.  
541 SAN CHRISTOPHER DR  
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name

SPATH, MARY D.

Street Address (P.O. Box Number is Not Acceptable)

343 E DOUGLAS RD

City

OLDSMAR

FL

Zip Code

34677

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

M & Spath

M. D. SPATH

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

TITLE PD  
NAME SPATH, MARY D.  
STREET ADDRESS 541 SAN CHRISTOPHER DR.  
CITY-ST-ZIP DUNEDIN FL ☐ Delete

TITLE TD  
NAME SPATH, MARY D  
STREET ADDRESS 541 SAN CHRISTOPHER DR.  
CITY-ST-ZIP DUNEDIN FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME SPATH, MARY D  
STREET ADDRESS 343 E DOUGLAS RD  
CITY-ST-ZIP OLDSMAR, FL 34677 ☒ Change ☐ Addition

TITLE TD  
NAME SPATH, MARY D  
STREET ADDRESS 343 E DOUGLAS RD  
CITY-ST-ZIP OLDSMAR, FL 34677 ☒ Change ☐ Addition

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

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

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

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:

M D Spath

M D SPATH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-01

Date

813 854 1772

Daytime Phone #

0555903

CR2E034 (10/00)