

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State
 01-31-2001 90279 026 ***150.00

DOCUMENT # P00000000017

1. Entity Name
CARPET BROTHERS, INC.

Principal Place of Business
756 OVERRIVER DRIVE
NORTH FT. MYERS FL 33903

Mailing Address
756 OVERRIVER DRIVE
NORTH FT. MYERS FL 33903

2. Principal Place of Business
5566 Cortez Rd. W.

3. Mailing Address
5566 Cortez Rd. W.

Suite, Apt. #, etc.

City & State
BRADENTON, FL

City & State
BRADENTON, FL

Zip
34210

Country
USA

4. FEI Number **APPLIED FOR**
65-0982087

Applied For
 Not Applicable

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

MANSFIELD, MICHAEL
756 OVERRIVER DRIVE
NORTH FT. MYERS FL 33903

Name
Michael R. Mansfield

Street Address (P.O. Box Number is Not Acceptable)
5566 CORTEZ RD. W

City
BRADENTON

Zip Code
FL 34210

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 **X Michael R Mansfield** **President** **1-25-01**

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	<input type="checkbox"/> Delete
	D MANSFIELD, MICHAEL	756 OVERRIVER DRIVE	NORTH FT. MYERS FL 33903	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
President	MICHAEL MANSFIELD	5566 CORTEZ RD. W	BRADENTON, FL 34210	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 **X Michael R Mansfield** **President** **1-25-01** **761-4677**

Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/00)