

2001. UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90322 024 ***150.00

DOCUMENT # P000000046386

1. Entity Name
 Southern Gentlemen Painting of Brevard, INC.

Principal Place of Business
 2280 Wilcox St.
 Melbourne, FL
 32904-4866

Mailing Address
 2280 Wilcox Street
 Melbourne, FL 32904-4866

2. Principal Place of Business
 2280 Wilcox Street
 Suite, Apt. #, etc.

3. Mailing Address
 2280 Wilcox Street
 Suite, Apt. #, etc.

City & State
 Melbourne, Florida

City & State
 Melbourne, Florida

Zip Country
 32904-4866 U.S.A.

Zip Country
 32904-4866 U.S.A.

4. FEI Number
 54-3643805

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

Combs, Larry P.
 2280 Wilcox Street
 Melbourne, FL 32904-4866

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 Larry P. Combs, General Manager
 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 P/S
 NAME Velie, Ricky Loren ☐ Delete
 STREET ADDRESS 2365 Cottonwood Lane
 CITY-ST-ZIP Melbourne, FL 32904

TITLE V/T
 NAME Bourne, Allen Harris ☐ Delete
 STREET ADDRESS 2558 Amberly Rd., NE
 CITY-ST-ZIP Palm Bay, FL 32905-2718

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-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: Ricky L. Velie, Ricky L. Velie
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)