

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90070 036 ***158.75

0073530

DOCUMENT # P00000057740

1. Entity Name
LINE-X PROTECTIVE COATINGS OF TAMPA BAY, INC.

Principal Place of Business 12855 BELCHER ROAD UNIT B11 LARGO FL 33765	Mailing Address 12855 BELCHER ROAD UNIT B11 LARGO FL 33765
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2. Principal Place of Business	3. Mailing Address 210 WYUN DRIVE
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State HUNTSVILLE, ALABAMA
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Zip	Country	Zip 35895	Country USA
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4. FEI Number 59-3645519	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SWEET, LOUIS T
12855 BELCHER ROAD
UNIT B11
LARGO FL 33765

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 _____ (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	D	<input type="checkbox"/> Delete
NAME	EPPS, GEORGE	
STREET ADDRESS	12855 BELCHER ROAD - UNIT B11	
CITY-ST-ZIP	LARGO FL 33765	
TITLE	D	<input type="checkbox"/> Delete
NAME	SWEET, GARY K	
STREET ADDRESS	12855 BELCHER ROAD - UNIT B11	
CITY-ST-ZIP	LARGO FL 33765	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: George F Epps **GEORGE F EPPS** 4/11/01 (256) 837-4430
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)