FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Feb 13, 2001 8:00 am DOCUMENT # P0000079713 **Secretary of State** 1. Entity Name RADNEY PAINTING, INC. 02-13-2001 90008 011 \*\*\*150.00 Principal Place of Business Mailing Address 3910 W BAY VISTA AVE 3910 W BAY VISTA AVE TAMPA FL 33611 TAMPA FL 33611 Place of Business DO NOT WRITE IN THIS SPACE City & State Applied For 66084 Not Applicable Zip Country \$8.75 Additional Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HOY, ROBIN R Street Address (A.O. 3910 W BAY VISTA AVE **TAMPA FL 33611** City 8. The above named entity submits this statement for the purpose of changing its registered office registered agent, or both, in the State of Florida FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible -≥10.∈Election Campaign\_Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) Change TITLE ☐ Delete TITLE ☐ Addition NAME HOY, ROBIN R NAME STREET ADDRESS STREET ADDRESS 3910 W BAY VISTA AVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33611 Change TITLE ☐ Delete TITLE NAME RADNEY, RALPH JR NAME STREET ADDRESS STREET ADDRESS 3910 W BAY VISTA AVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33611 Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 the rike empowered.